# Case 18-19803 Doc 1 Filed 07/16/18 Entered 07/16/18 12:41:30 Desc Main Document Page 1 of 55

Fill in this information to identify your case:	UNITED STATES BANKBUPTCY COURT
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS
Northern District of Illinois	Comments of the Comments of th
Case number (if known): Chapter you are filing under:	の で
☐ Chapter 11	JEFFREY P. ALLETEADT, CLERK
Chapter 13	Check if this is ar
☐ Chapter 12	JEFFREY P. ALLSTEADT, CLERK  TANK the k if this is a amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Jeffrey	Delores
	identification (for example,	First name	First name
	your driver's license or	M	
	passport).	Middle name	Middle name
	Bring your picture	Roberts	Roberts
	identification to your meeting with the trustee.	Last name	Last name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	жинический подорожно под под под под под под под под под по	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
Ombeshed	ett kalleste kontrol killeret eta eta eta eta eta eta eta eta eta e	$1.24 \times 10^{-10} \times 10$	
3.	Only the last 4 digits of	xxx - xx - <u>8</u> <u>7</u> <u>2</u> <u>8</u>	xxx - xx - <u>4 6 6 6</u>
	your Social Security number or federal	OR	
	Individual Taxpayer		OR
	Identification number	9 xx - xx	9 xx - xx

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Jeffrey M Roberts

Debtor 1

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a Joint Case):
names or EINs.
***************************************
MARKATA AND AND AND AND AND AND AND AND AND AN
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D	ebtor 1 Jeffrey M Rok	oerts	Last Name		-	Case number (#	known)
P	art 2: Tell the Court Abo	ut Your	Bankrupto	cy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file	Check for Ban	<i>kruptcy</i> (Fo	brief description of rm 2010)). Also, g	f each, see <i>Not</i> to the top of p	ice Required by 1 age 1 and check t	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
	under		apter 11				
			apter 12				
			apter 13				
8.	How you will pay the fee	loca you sub with  I ne App  I red By I less pay	al court for rself, you is mitting you a pre-prine d to pay elication for quest that aw, a judg than 150° the fee in	more details about may pay with casur payment on your ted address.  The fee in instair Individuals to Fit my fee be wait the may, but is nown of the official prinstallments). If	out how you n sh, cashier's c our behalf, you allments. If yo ay The Filing yed (You may t required to, you choose th	nay pay. Typical check, or money ur attorney may u choose this of Fee in Installme request this optivative your fee, at applies to yours option, you mis optio	leck with the clerk's office in your lly, if you are paying the fee order. If your attorney is pay with a credit card or check official, sign and attach the ents (Official Form 103A).  Ition only if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.			When When When	MM / DD / YYYY	Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District		When	MM/DD/YYYY	Relationship to you  Case number, if known  Relationship to you
			District	THE CONTRACTOR OF THE CONTRACT	When	MM / DD / YYYY	Case number, if known
 I <b>1</b> ,	Do you rent your residence?	☑ No.	Go to line Has your I	12. landlord obtained a o to line 12.	in eviction judgi nent About an E	ment against you?	Against You (Form 101A) and file it as

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Jeffrey M Rol	oerts	Last Name	haraharan marana	Case	number (if knot	wn)	
art 3: Report About Any	Rucinaa	ses You Own as a S	iolo Dennii-	<b>.</b>			
Report About Any	pusines	ses for own as a 5	ole Proprie	tor			
Are you a sole proprietor of any full- or part-time	☐ No.	Go to Part 4.					
business?	🛭 Yes	. Name and location of b	ousiness				
A sole proprietorship is a business you operate as an		Mary Jo Roberts					
individual, and is not a		Name of business, if any					
separate legal entity such as a corporation, partnership, or LLC.		130 Chambord Number Street			···		
If you have more than one sole proprietorship, use a							
separate sheet and attach it		Bloomingdale			[]	60108	
to this petition.		City			State	ZIP Code	
		Check the appropriate	box to descrit	ne your business	s:		
		☐ Health Care Busine	ess (as define	d in 11 U.S.C. §	101(27A))		
		☐ Single Asset Real E	Estate (as defi	ned in 11 U.S.C	§ 101(51B	))	
		☐ Stockbroker (as det	fined in 11 U.S	S.C. § 101(53A)	)		
		☐ Commodity Broker	(as defined in	11 U.S.C. § 10	1(6))		
		☑ None of the above					
are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☑ No. □ No.	hese documents do not en a man not filing under Chapte the Bankruptcy Code.  I am filing under Chapte the Bankruptcy Code. Bankruptcy Code.	apter 11. er 11, but I am	ı NOT a smail bı	usiness deb	tor according to	
rt 4: Report if You Own o	or Have	Any Hazardous Prop	perty or Any	Property Th	at Needs	Immediate A	ttention
property that poses or is alleged to pose a threat	-	What is the hazard?					
of imminent and identifiable hazard to public health or safety? Or do you own any	_ 100.	vinde is the indexity:					
property that needs immediate attention?		If immediate attention	is needed, wh	y is it needed?			**************************************
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			H4.74/			to the third of th	
		Where is the property?	Number	Street			
							***************************************
			City			State	ZIP Code

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Debtor	1	
Deptor	1	

<b>Jeffrey</b>	M	Roberts	
First Name		Siddle Marne	

Last Name

Case number (if known)	
------------------------	--

#### Part 5:

### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	bout
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Jeffrey M Rol	oerts me Last Name	Case number (if kn)	own)
Part 6	Answer These Que	stions for Reporting Purpo		
	at kind of debts do have?	16a. Are your debts prima as "incurred by an individ	arily consumer debts? Consumer deb ual primarily for a personal, family, or hous	ts are defined in 11 U.S.C. § 101(8) sehold purpose."
,		No. Go to line 16b.  Yes. Go to line 17.		
		16b. <b>Are your debts prima</b> money for a business or i	arily business debts? Business debts nvestment or through the operation of the	are debts that you incurred to obtain business or investment.
		<ul><li>□ No. Go to line 16c.</li><li>□ Yes. Go to line 17.</li></ul>		
		16c. State the type of debts yo	ou owe that are not consumer debts or bus	iness debts.
	you filing under pter 7?	□ No. I am not filing under C	Chapter 7. Go to line 18.	
any	ou estimate that after exempt property is	administrative expens	oter 7. Do you estimate that after any exem es are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?
adm	uded and inistrative expenses	₩ No		
avai	paid that funds will be lable for distribution nsecured creditors?	☐ Yes		
	many creditors do	2 1-49	1,000-5,000	25,001-50,000
you owe	estimate that you ?	50-99 100-199	5,001-10,000 10,001-25,000	50,001-100,000
Negúmbód pontány helphanete visy	okalandoksi engippi, kalikaroksiya ing kaharak okuksi jor sakang kang bersid 120 km/g ksisal kad yang	200-999	10,001-25,000	☐ More than 100,000
9. How	much do you	\$0-\$50,000	□ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion
	mate your assets to vorth?	\$50,001-\$100,000 \$100,001-\$500,000	☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million	31,000,000,001-\$10 billion
		\$500,001-\$300,000	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion
.o. How	much do you	\$0-\$50,000	\$1,000,001-\$10 million	□ \$500,000,001-\$1 billion
estin to be	nate your liabilities	\$50,001-\$100,000	□ \$10,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion
10 56	; ;	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million	□ \$10,000,000,001-\$50 billion
Part 7:	Sign Below	<b>2</b> \$300,001-\$1 minion	□ \$100,000,001-\$500 million	☐ More than \$50 billion
For you		I have examined this petition, a correct.	nd I declare under penalty of perjury that t	he information provided is true and
		If I have chosen to file under Ch of title 11, United States Code. under Chapter 7.	napter 7, I am aware that I may proceed, if I understand the relief available under eac	eligible, under Chapter 7, 11,12, or 13 th chapter, and I choose to proceed
		If no attorney represents me an this document, I have obtained	d I did not pay or agree to pay someone wand read the notice required by 11 U.S.C.	tho is not an attorney to help me fill out § 342(b).
			ith the chapter of title 11, United States Co	
		I understand making a false sta with a bankruptcy case can rest 18 U.S.O. §§ 1521, 341, 1519,	tement, concealing property, or obtaining ult in fines up to \$250,000, or imprisonment and 3571.	money or property by fraud in connection at for up to 20 years, or both.
		Signature of Debtor 1	Kobert * Signature	Selvers M. Lots of Debtor 2
		Executed on 07/11/2018	Executed	
		MM / DD /	YYYY	MM / DD /YYYY

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ebtor 1 Jeffrey M Rob First Name Middle Nam		Case number (if known)			
or your attorney, if you are epresented by one	I, the attorney for the debtor(s) named in this to proceed under Chapter 7, 11, 12, or 13 of t available under each chapter for which the pe	petition, declare that I have informed the debtor(s) about the 11, United States Code, and have explained the reli- son is eligible. I also certify that I have delivered to the in a case in which § 707(b)(4)(D) applies, certify that I	t eligibilit ef debtor(s		
you are not represented	knowledge after an inquiry that the information	in the schedules filed with the petition is incorrect.	nave no		
y an attorney, you do not eed to file this page.	×				
	Signature of Attorney for Debtor	Date MM / DD /YYYY			
	Printed name				
	Firm name				
	Number Street				
			-		
	City	State ZIP Code			
	Contact phone	Email address	*****		
	Bar number	State			

NA

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Debtor 1

Jeffrey M Roberts
First Name Middle Name Last Name Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

·	
Are you aware that filing for bankruptcy is a serious act consequences?	ion with long-term financial and legal
☐ No ☑ Yes	
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or impriso	and that if your bankruptcy forms are ned?
☐ No ☑ Yes	
Did you pay or agree to pay someone who is not an att	orney to help you fill out your bankruptcy forms?
Yes. Name of Person	laration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware t	hat filing a bankruptcy case without an
attorney may cause me to lose my rights or property if I	do not properly handle the sase.  Signature of Debtor 2
Date 07/11/2018 MW / DD / YYYY	Date 07/11/2018 MM / DD / YYYY
Contact phone (630) 893-9310	Contact phone (630) 893-9310
Cell phone (630) 699-5785	Cell phone (630) 215-5345
Email address jeffreyroberts130@sbcglobal.ne	Email address maryjoroberts@sbcglobal.net

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Fill in this in	formation to ic	dentify your case:	
Debtor 1	Jeffrey M Ro	oberts	
	First Name	Middle Name	Last Name
Debtor 2	Delores M I	Roberts	
(Spouse, if filing)	First Name	Middle Name	Last Name
United States (	Bankruptcy Court	for the: Northern District of Illino	is
	(IT KNOWN)		

Check if this is an amended filing

12/15

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	s 230,000.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$ 230,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 27,150.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 257,150.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Amount you owe
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$222,348.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ s 43,026.70
	+ \$ 43,026.70
Your total liabilities	s 265,374.70
Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$3,870.00
Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$5,173.00

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Del	otor 1 Jeffrey M Roberts First Name Middle Name Last Name	Case number (if known)	
	First Name Middle Name Last Name	-	
Pa	rt 4: Answer These Questions for Administrative and Statistical Record	is	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	<ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this</li> <li>✓ Yes</li> </ul>	form to the court with your othe	r schedules.
7.	What kind of debt do you have?	•••••••••••••••••••••••••••••••••••••••	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by a family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	in individual primarily for a perso poses. 28 U.S.C. § 159.	onal,
Na Washing St. Na	Your debts are not primarily consumer debts. You have nothing to report on this pathis form to the court with your other schedules.	art of the form. Check this box ar	nd submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	750.00
			\$ <u>750.00</u>
Common est		e to the enterest comments and the engineering	
9. (	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:		
		Total claim	
	From Part 4 on Schedule E/F, copy the following:		
9	a. Domestic support obligations (Copy line 6a.)	\$	
ç	b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9	c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00	
9	d. Student loans. (Copy line 6f.)	\$0.00	
g	<ul> <li>e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ul>	\$0.00	
g	f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
9	g. <b>Total.</b> Add lines 9a through 9f.	s0.00	

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Fill in this information to identify your case and t	nis filing:		
Debtor 1 Jeffrey M Roberts			
First Name Middle Name Debtor 2 Delores M Roberts	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of	of Illinois		
Case number	······		
			Check if this is an amended filing
Official Form 106A/B			
Schedule A/B: Proper	ty		12/15
responsible for supplying correct information. If rewrite your name and case number (if known). Ans	ns. List an asset only once. If an asset fits in more lete and accurate as possible. If two married peop more space is needed, attach a separate sheet to to swer every question.  J. Land, or Other Real Estate You Own or Ha	le are filing together, b his form. On the top of	oth are equally
1. Do you own or have any legal or equitable inter	est in any residence, building, land, or similar pro	perty?	
No. Go to Part 2.	•	•	
✓ Yes. Where is the property?	What is the property? Check all that apply.		
1.1 130 Chambord	Single-family home	the amount of any securi	laims or exemptions. Put ed claims on <i>Schedule D:</i>
1.1. Street address, if available, or other description	Duplex or multi-unit building     Condominium or cooperative	Creditors Who Have Cla	ims Secured by Property.
	Condominium or cooperative  Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land	\$ 230,000.00	\$ 230,000.00
Bloomingdale IL 60108	Investment property  Timeshare	Describe the nature	of your ownership
City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.	the shareties, or a m	e estate), ii kitowii.
DuPage	Debtor 1 only		
County	Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Check if this is co	ommunity property
	At least one of the debtors and another	(see instructions)	, , , , , , , , , , , , , , , , , , , ,
	Other information you wish to add about this it property identification number:	em, such as local	
If you own or have more than one, list here:	property identification number.		
	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
1.2.	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Street address, if available, or other description	Condominium or cooperative		Current value of the
	☐ Manufactured or mobile home	entire property?	portion you own?
	Land Investment property	\$	\$
City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		estate, ii kilowii.
	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
	Other information you wish to add about this ited	n. such as local	
	property identification number:		

Document Page 12 of 55 Jeffrey M Roberts Debtor 1 Case number (if known) Middle Name Last Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ■ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? Manufactured or mobile home portion you own? Land investment property State ZIP Code Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: \_ 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 230,000.00 you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ☑ Yes Lexus Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put ES350 Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2007 Year: Debtor 1 and Debtor 2 only Current value of the Current value of the 151200 Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 2,400.00 2,400.00 ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Lexus Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put ES350 the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2015 Year: Current value of the Debtor 1 and Debtor 2 only Current value of the 58450 Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see Lease that has exceeded instructions) mileage, so it has no value.

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Dobtor 1	Jeffrey	M Roberts	
Debtor 1	ociney	INI LYONGITO	

Debtor 1	Jeffrey M	/I Roberts	Document	Page 13 01 55
	First Name	Middle Name	Last Name	Case number (if known)

3.3.	Make:	Buick	Who has an interest in the property? Check one.	Do not deduct secured c	laims or exemptions. Put
	Model:	Encore	Debtor 1 only	the amount of any securi	ed claims on Schedule D:
	Year:	2015	Debtor 2 only	Creditors who have Clai	ims Secured by Property.
		20990	Debtor 1 and Debtor 2 only	Current value of the	
	Approximate mileage:		At least one of the debtors and another	entire property?	portion you own?
	Other information:	**************************************		s 19,400.00	s 19,400.00
		-	Check if this is community property (see instructions)	\$	\$
	and the state of t		mandenons)		
3.4.	Make:		Who has an interest in the property? Check one.	Da mak dada at a a a a a a a a	
J.4.	Model:		Debtor 1 only	Do not deduct secured cl the amount of any secure	ed claims on Schedule D:
		4	Debtor 2 only	Creditors Who Have Clair	ms Secured by Property.
	Year:		Debtor 1 and Debtor 2 only	Current value of the	
	Approximate mileage:	-WARRANA	At least one of the debtors and another	entire property?	portion you own?
	Other information:				
	**************************************	THE STATE OF THE S	Check if this is community property (see	\$	\$
		¥ .	instructions)		
Wate	rcraft, aircraft, motor h	omes. ATVs and o	other recreational vehicles, other vehicles, and acces	corine	
			rcraft, fishing vessels, snowmobiles, motorcycle accessor		
Z N					
□ Ye	es				
4.1.	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla	eime or avamations. But
	Model:		Debtor 1 only	the amount of any secured claims on Schedule D:	
			Debtor 2 only	Creditors Who Have Clain	ns Secured by Property.
	Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:		At least one of the debtors and another	entire property?	portion you own?
		AAA maa ay caa aa	☐ Check if this is community property (see	•	_
		APPLICATE THE STATE OF THE STAT	instructions)	\$	\$
		l			
lf you	own or have more than	one, list here			
	Make:	,	Who has an interest in the property? Check one.		
			Debtor 1 only	Do not deduct secured cla the amount of any secured	d claims on Schedule D:
	Model:		Debtor 2 only	Creditors Who Have Claim	ns Secured by Property.
	Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:		At least one of the debtors and another	entire property?	portion you own?
		emacu ven c	☐ Check if this is community property (see	\$	\$
			instructions)		
	water and the second se				
Add th	ne dollar value of the p	ortion you own for	r all of your entries from Part 2, including any entries	for pages	24 900 00
you ha	ave attached for Part 2	Write that numbe	r here	Tor pages	21,800.00
				·	

5.

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Debtor 1

Jeffrey M Roberts First Name Middle Name

Last Name

Case number (if known)\_

Part 3:	Describe Your Personal and Household Items

Do	you own or have any leg	al or equitable interest in any of the following items?	Current value portion you Do not deduct or exemptions	own? secured claims
6.	Household goods and fur	rnishings	0, 0,0,0,0,0	•
	<del></del>	es, furniture, linens, china, kitchenware		
	□ No			
	Yes. Describe			0.040.00
		ioushold fulfillate	\$	2,040.00
7.	Electronics		. 1	
	Examples: Televisions and	radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music		
	collections; elec	tronic devices including cell phones, cameras, media players, games		
	☐ No			
	Yes. Describe	elevision		280.00
	į. I	OIC VIOLOTT	\$	200.00
8.	Collectibles of value			
	Examples: Antiques and fig	surines; paintings, prints, or other artwork; books, pictures, or other art objects;		
	stamp, coin, or t	baseball card collections; other collections, memorabilia, collectibles		
	No .			
	Yes. Describe		\$	
_	·	And the second s		
	Equipment for sports and			
	Examples: Sports, photogra	aphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes pentry tools; musical instruments		
	☑ No	·		
	Yes. Describe		~	
	es. Describe		\$	
10	Firearms	The second secon		
		otorios amanumikas and adalahada a kan		
	No No	otguns, ammunition, and related equipment		
	Yes. Describe		7	
			\$	
11.0	Clothes	The state of the s	n.i	
	Examples: Everyday clothes	s, furs, leather coats, designer wear, shoes, accessories		
	☐ No			
	Yes. Describe C	lothina	\$	500.00
			Φ	
	Jewelry			
	Examples: Everyday jewelry gold, silver	r, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	□ No			
			_	1,200.00
	Ri	ings	\$	1,200.00
13.	ion-farm animals			
I	Examples: Dogs, cats, birds	, horses		
(	<b>⊿</b> No			
	Yes. Describe		•	
	٠		\$	
14. <b>/</b>	Any other personal and ho	usehold items you did not already list, including any health aids you did not list		
		,,		
	☑ No ☑ Yes. Give specific		1	
ļ			\$	
			}	
15.	Add the dollar value of all	of your entries from Part 3, including any entries for pages you have attached	\$	4,020.00
f	or Part 3. Write that numb	er here		1,020.00

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Debtor 1

Jeffrey M Roberts

**Describe Your Financial Assets** 

Last Name

Case number (if known)\_

Do you own or have any	/ legal or equitable interest in	any of the following?		Current value of the portion you own?  Do not deduct secured claim or exemptions.
16. <b>Cash</b> <i>Examples:</i> Money you	ı have in your wallet, in your hoi	ne, in a safe deposit box, and on hand when you file	your netition	
□ No		, , , , , , , , , , , , , , , , , , , ,	your polition	
		······································	Cash:	\$50.00
and other s	savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, nultiple accounts with the same institution, list each.	brokerage houses,	
<b>2</b> Yes		Institution name:		
	17.1. Checking account:	Chase Bank		s 210.00
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
	or publicly traded stocks investment accounts with broken	erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
				\$
				\$
			A A A A A A A A A A A A A A A A A A A	\$
19. Non-publicly traded s an LLC, partnership, a	tock and interests in incorpor and joint venture	ated and unincorporated businesses, including	an interest in	
☐ No	Name of entity:	%	of ownership:	
Yes. Give specific information about	Roberts and Associate		00%%	\$90.00
them			% %	\$
		U	<u>%</u> %	\$

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vernment and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' thecks, promissory notes, and money orders.  negotiable instruments are those you cannot transfer to someone by signing or delivering them.  No  Yes. Give specific information about them.    Secount	vernment and corporate bonds and other negotiable and non-negotiable instruments godiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  - regotiable instruments are those you cannot transfer to someone by signing or delivering them.  No  Yes. Give specific information about them.    S	Jeffrey M	Roberts	Document	Page 16 01 55	
possible instruments include personal checks, cashiers' checks, promissory notes, and money orders.  n-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  No Yes. Give specific information about them.    Second	possible instruments include personal checks, cashiers' checks, promissory notes, and money orders.  n-regotable instruments are those you cannot transfer to someone by signing or delivering them.  No Yes, Give specific information about them.    S	First Name	Middle Name	Last Name	Saccination (in Month)	
No Yes. Give specific information about them.    Issuer name: information about them.   S	poliable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  n-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  No Yes, Give specific informalion about them.  S  Internent or pension accounts  Implies: Inferests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  No Yes, List each account separately.  Type of account. Institution name:  401(k) or similar plan Pension plan:  Retirement account:  Keogh Additional account:  S  Retirement account:  S  Retirement account:  S  Additional account:  S  Additional account:  S  Additional account:  S  S  S  S  S  S  S  S  S  S  S  S  S	·				
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Yes Give specific information about them	Yes Give specific information about them		• • • • • • • • • • • • • • • • • • • •		y old mig of contouring them.	
information about them	information about them		Issuer name:			
strement or pension accounts  Imples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  No Yes, List each account separately. Type of account: Institution name.  401(k) or similar plan: Pension plan:  IRA: Retirement account: Keogh Additional account: S Additional account: Additional account: S  urity deposits and prepayments r share of all unused deposits you have made so that you may continue service or use from a company mples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  No Yes Institution name or individual: Electric: Gas: S Gas: Heating oi: S Security deposit on rental unit: Prepaid rent. Telephone: Water: Rented furniture: S S Rented furniture: S S S S S S S S S S S S S S S S S S S	Signature of the pension accounts  Inspired: Inferests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  No Yes. List each account separately.  Type of account. Institution name  401(k) or similar plan:  Pension plan:  IRA:  Retirement account:  Keogh Additional account:  Additional account:  Additional account:  Signature of all unused deposits you have made so that you may continue service or use from a company imples: Agreements with landiords, prepaid rent, public utilities (electric, gas, water), telecommunications panies, or others  No Yes Institution name or individual:  Electric:  Gas:  Signature of all unused deposits or rental unit.  Prepaid rent:  Signature of a limited of the prepaid rent o	information about				•
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Additional account:  Braine or olal unused deposits you have made so that you may continue service or use from a company mples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications panies, or others  No  Institution name or individual:  Electric:  Gas:  Heating oil:  Sacurity deposit on rental unit:  Prepaid rent.  Telephone:  Water:  Rented furniture:  Rented furniture:  Restreed furniture:  No  Vester:  Rented furniture:  No  Rented furniture:  Institution name or service or use from a company multiput of the communications panies, or others  No  Sacurity deposit on rental unit:  Sacu	### Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  No  Yes. List each account separately. Type of account: Institution name:  ### 401(k) or similar plan:					<u>\$</u>
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Security deposit on rental unit:	Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:					_ \$
Prepaid rent:         \$           Telephone:         \$           Water:         \$           Rented furniture:         \$	Prepaid rent:         \$           Telephone:         \$           Water:         \$           Rented furniture:         \$           Other:         \$			tal unit:		- \$ <u></u>
Telephone:	Telephone:					\$
Water:	Water:		·			- \$ <u>-</u>
Rented furniture: \$\$	Rented furniture:\$					- \$ <u></u>
	Other:		Rented furniture:			- \$ <u>.</u>
			Other:			_

### 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

<b>☑</b> No		
☐ Yes	Issuer name and description:	
		\$
		\$
		\$

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Debtor 1

Jeffrey M Roberts

Middle Name Last Name

Case number (if known)\_

24 Interests in an education IRA in	an ac	count in a qualified ABLE program, or under a qualified s		
26 U.S.C. §§ 530(b)(1), 529A(b), a	and 52	9(b)(1).	state tuition program.	
☑ No				
Yes	etitutio	n name and description. Separately file the records of any inte	4411 C O C 5041	
1113	Juliano	Than and description. Deparately sile the records of any title	eresis. 1 1 0.5.C. § 521(0	y):
				\$
				\$
<u></u>				<b>S</b>
25. Trusts, equitable or future intere exercisable for your benefit	ets in	property (other than anything listed in line 1), and rights	or powers	
☑ No				
☐ Yes. Give specific		Contractive Country Comments of the Contractive Contra		
information about them				\$
			the matter of the following of the continuous control of the contr	
26. Patents, copyrights, trademarks,	, trade	secrets, and other intellectual property		
No	, webs	ites, proceeds from royalties and licensing agreements		
,			77.75°	77
Yes. Give specific information about them				•
				\$
27. Licenses, franchises, and other of		al intangibles enses, cooperative association holdings, liquor licenses, profe		
☑ No	,, , , , , , , , , , , , , , , , , , ,	moos, cooperative association floralities, riquol licenses, profe	ssional licenses	
Yes. Give specific				Ì
information about them				\$
Money or property owed to you?				Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
28. Tax refunds owed to you				
☑ No				
Yes. Give specific information		Comment from the Control of Contr		
about them, including whe			Federal: \$	
you already filed the return and the tax years			State: \$	) 
			Local: \$	)
29. Family support				
	limony	, spousal support, child support, maintenance, divorce settlen	nent, property settlemen	t
☑ No		and the state of t		
Yes. Give specific information			• • •	
			Alimony:	\$
		;	Maintenance:	\$
			Support:	\$
		•	Divorce settlement:	\$
		and a supplemental of the	Property settlement:	\$
30. Other amounts someone owes yo	Du	man manufacture disability to a first transfer of		
Social Security benefits:	ınsura ; unpai	nce payments, disability benefits, sick pay, vacation pay, wo d loans you made to someone else	rkers' compensation,	
☑ No	-12 #=1	,		
☐ Yes. Give specific information			the second section of the sect	
•				\$

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Yes. Describe.

Z No

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Case 18-19803 Doc 1 Filed 07/16/18 Entered 07/16/18 12:41:30 Desc Main Page 19 of 55 Document Jeffrey M Roberts Debtor 1 Case number (if known) First Name Middle Nam 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No Yes. Describe. 980.00 Computers and Printers 41. Inventory No Yes. Describe... 42. Interests in partnerships or joint ventures ☑ No Yes. Describe..... Name of entity: % of ownership: % 43. Customer lists, mailing lists, or other compilations ☑ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list ₩ No Yes. Give specific information ...... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 980.00 for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions,

Official Form 106A/B

☐ Yes.....

47. Farm animals

M No

Examples: Livestock, poultry, farm-raised fish

Jeffrey M Roberts Debtor 1 Case number (if known), First Name 48. Crops—either growing or harvested ☑ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Z No ☐ Yes 50. Farm and fishing supplies, chemicals, and feed **Z** No Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☑ No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 Part 8: List the Totals of Each Part of this Form 230,000.00 55. Part 1: Total real estate, line 2 21,800.00 56. Part 2: Total vehicles, line 5 4.020.00 57. Part 3: Total personal and household items, line 15 350.00 58. Part 4: Total financial assets, line 36 980.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 27,150.00 62. Total personal property. Add lines 56 through 61. 27,150.00 Copy personal property total → +s 63. Total of all property on Schedule A/B. Add line 55 + line 62. 257,150.00 Official Form 106A/B Schedule A/B: Property

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Desc Main

page 10

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Fill in this i	nformation to identify your case:			
Debtor 1	Jeffrey M Roberts			
Debtor 2	First Name Middle Name Delores M Roberts	Last Name		
(Spouse, if filing	•	Last Name		
_	Bankruptcy Court for the; Northern Distr	rict of Illinois		
Case number (If known)				Check if this is ar amended filing
				•
Official	Form 106C			
Sched	dule C: The Pro	perty You	Claim as Exemp	<b>t</b> 04/16
Using the prop space is need	perty you listed on Schedule A/B: Pro	perty (Official Form 106	ogether, both are equally responsible for A/B) as your source, list the property that Additional Page as necessary. On the top	t you claim as exempt. If more
of any applic retirement fu limits the exe	able statutory limit. Some exemption nds—may be unlimited in dollar an	ons—such as those for nount. However, if you nt and the value of the	I fair market value of the property beir r health aids, rights to receive certain claim an exemption of 100% of fair ma property is determined to exceed that	benefits, and tax-exempt arket value under a law that
	dentify the Property You Clain			
	et of exemptions are you claiming?			
	are claiming state and federal nonban are claiming federal exemptions. 11 L		U.S.C. § 522(b)(3)	
2. For any p	property you list on Schedule A/B t	hat you claim as exem	pt, fill in the information below.	
	scription of the property and line on le A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description	on 130 Chambord	\$ <u>230,</u> 000.00	<b>3</b> \$	735 ILCS 5/12-901,902,906
Line from Schedule	1 1 1		100% of fair market value, up to any applicable statutory limit	
	AVD.		only application of actions, mine	
Brief description	on: 2007 Lexus ES350	\$2,400.00	<b>3</b> \$	735 ILCS 5/12-1001(c)
Line from Schedule	.5 1		100% of fair market value, up to any applicable statutory limit	
Brief	2015 Buick Encore	\$ 19,400.00	<b></b>	735 ILCS 5/12-1001(c)
description Line from Schedule	л,		100% of fair market value, up to any applicable statutory limit	
	claiming a homestead exemption o			
(Subject t <b>⊠</b> No	o adjustment on 4/01/19 and every 3	years after that for case	s filed on or after the date of adjustment.	)
	Did you acquire the property covered	by the exemption within	1,215 days before you filed this case?	
	√os			

Document

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Debtor 1

Jeffrey M Roberts
First Name Middle Name

Last Name

Case number (d known)\_

### **Additional Page**

	on of the property and line VB that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	Furnishings 6	\$2,040.00	■ \$ \$ 100% of fair market value, up to any applicable statutory limit	735ILCS5/121001(b)
Brief description: Line from Schedule A/B:	Electronics 7	\$ 280.00	\$ \$ any applicable statutory limit	735ILCS5/121001(b)
Brief description: Line from Schedule A/B:	Clothes 11	\$500.00	□ \$  100% of fair market value, up to any applicable statutory limit	735ILCS5/121001(b)
Brief description: Line from Schedule A/B:	Jewelry 12	\$1,200.00	□ s s s s s	735ILCS5/121001(b)
Brief description: Line from Schedule A/B:	<u>Cash</u>	\$ 50.00	\$ \$ 100% of fair market value, up to any applicable statutory limit	735ILCS5/121001(b)
Brief description: Line from Schedule A/B:	Checking Account	\$210.00	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	Roberts and Assoc	\$90.00	□ \$  100% of fair market value, up to any applicable statutory limit	735ILCS5/121001(b)
Brief description: Line from Schedule A/B:	Business Assets 40	\$980.00	\$ \$ 100% of fair market value, up to any applicable statutory limit	735ILCS5/121001
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	e e e e e e e e e e e e e e e e e e e	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your case	se:			
Debtor 1 Jeffrey M Roberts				
Debtor 1 Jeffrey W Roberts First Name Middle	Name Last Name			
Debtor 2 Delores M Roberts (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern				
Case number				
(If known)				if this is an led filing
			antenç	red ming
Official Form 106D				
	s Who Have Claims Secur			12/15
information. If more space is needed, cop	If two married people are filing together, both are ed y the Additional Page, fill it out, number the entries,	qually responsible for and attach it to this	or supplying correct form. On the top o	ct f anv
additional pages, write your name and cas	se number (if known).		to the top o	· uny
Do any creditors have claims secured b	v vour property?			
	n to the court with your other schedules. You have noth	ing else to report on t	his form.	
✓ Yes. Fill in all of the information below.	•	3		
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has n	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
As much as possible, list the claims in alph	abetical order according to the creditor's name.	value of collateral.	claim	if any
2.1 Wells Fargo	Describe the property that secures the claim:	\$ 200,948.00	s 230,000.00	en en englande Miller
Creditor's Name	besome the property trial sections the claim:	3 200,010.00	\$	\$
PO Box 10394	First Mortgage on 130 Chambord			
Number Street	Bloomingdale IL			
	As of the date you file, the claim is: Check all that apply.			
De Moines IA 50306	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	·			
Debtor 1 only	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured)			
Debtor 2 only	<ul> <li>An agreement you made (such as mortgage or secured car loan)</li> </ul>			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt	4406			
Date debt was incurred 04/01/2005	Last 4 digits of account number	er sport frem fan fernam en fan tre skriver oan de skriver produktier fan de skriver fan de skriver fan de skri	ور منوسور و موسوم و و مراسعه معدول و الرابع المساوم و المساوم و و و و موسوم و المساوم و المساوم و المساوم و المساوم و	en e
bank of America	Describe the property that secures the claim:	\$ 2,000.00	\$2,000.00	\$ 0.00
Creditor's Name PO Box 31785	Equity loan on 130 Chambord	Section of the sectio		
Number Street	Bloomingdale IL	N a the Frankens		
	As of the date you file, the claim is: Check all that apply.			
T	☐ Contingent			
Tampa FL 33631 City State ZIP Code	Unliquidated			
,	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 09/01/2010	Last 4 digits of account number 1 0 9 9	200		
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	s 202,948.00	and the second of the second s	

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Debtor	1	

Jeffrey M	Roberts
-----------	---------

First Name Middle Name	Last Name	HIDEI (IT KNOWN)	V 10 10 10 10 10 10 10 10 10 10 10 10 10	
Part 1: Additional Page After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Ally Financial	Describe the property that secures the claim:	\$19,400.00	\$19,400.00	•
Creditor's Name PO Box 8127  Number Street	Installment Loan on 2015 Buick Encore			
Cockeysville md 21030 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	j		
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred 06/01/2018	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	-		
Creditor's Name	Describe the property that secures the claim:	Angelegiji ir kolmonini katika proposa proposa proposa proposa proposa proposa proposa proposa proposa proposa B	s, in an a nagolagian sahasil sijaqiya siyaqiya gilimin and asasil sahasil sah	T3 માં માના 3 માટે માને જ માં મોહિયા જોઈ સામિતી મહિતી કહેવા છે.
Number Street  City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or secured car loan)  ☐ Statutory lien (such as tax lien, mechanic's lien)  ☐ Judgment lien from a lawsuit  ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name  Number Street	Describe the property that secures the claim:	nggggggad di geginhishamat kalamban pengggggadan seri ana arangggg	\$\$	O d 4 million we experience from the control of the
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	□ Disputed  Nature of lien. Check all that apply.  □ An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
	in Column A on this page. Write that number here: add the dollar value totals from all pages.	19,400.00		

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Fill in this in	nformation to identify your case:				
			•		
Debtor 1	Jeffrey M Roberts First Name Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	Delores M Roberts First Name Middle Name	Last Name			
United States	Bankruptcy Court for the: Northern District				
_	parkidates courties are. Mouthern District	OT INITIONS		∏ cho	ck if this is an
Case number (If known)					ended filing
Official F	Form 106E/F				
Schedu	ule E/F: Creditors V	Vho Have Unsec	ured Claims		12/15
A/B: Property creditors with needed, copy any additional	te and accurate as possible. Use Pan party to any executory contracts or a (Official Form 106A/B) and on Scheo partially secured claims that are list the Part you need, fill it out, number I pages, write your name and case no at All of Your PRIORITY Unsecur	unexpired leases that could resu- fule G: Executory Contracts and ed in Schedule D: Creditors Who the entries in the boxes on the lease umber (if known).	It in a claim. Also list execut Unexpired Leases (Official For Have Claims Secured by Pro	tory contracts on S form 106G). Do not	Schedule include any
	·				
1. Do any cre	ditors have priority unsecured claim	s against you?			
Yes.	to Fait 2.				
nonpriority : unsecured	your priority unsecured claims. If a cr listed, identify what type of claim it is. If amounts. As much as possible, list the claims, fill out the Continuation Page of lanation of each type of claim, see the i	a claim has both priority and nonpi claims in alphabetical order accordi Part 1. If more than one creditor ho	riority amounts, list that claim h ing to the creditor's name. If yo olds a particular claim, list the c	nere and show both pour have more than to other creditors in Par laim Priority	priority and vo priority rt 3.
2.1				amount	amount
Priority Credi	tor's Name	Last 4 digits of account number	· \$	\$	_ \$
		When was the debt incurred?	***************************************		
Number	Street				
		As of the date you file, the claim	is: Check all that apply		
City	State ZIP Code	☐ Contingent ☐ Unliquidated			
	red the debt? Check one.	Disputed			
Debtor		·			
_	2 only 1 and Debtor 2 only	Type of PRIORITY unsecured	claim:		
	one of the debtors and another	Domestic support obligations			
	if this claim is for a community debt	Taxes and certain other debts yo			
	n subject to offset?	Claims for death or personal injurintoxicated	ry while you were		
□ No		Other Specify	***		
☐ Yes	- THE CONTROL OF THE PROPERTY OF THE SECOND				
.2		Last 4 digits of account number			
Priority Credit	or's Name	When was the debt incurred?	<u> </u>	\$	_ \$
Number	Sireel	THO Was the dept mounted p			
		As of the date you file, the claim	is: Check all that apply		
		☐ Contingent			
City	State ZIP Code	Unliquidated			
	red the debt? Check one.	☐ Disputed			
Debtor 1	•	Type of PRIORITY unsecured of	laim:		
Debtor 2		Oomestic support obligations	ountly		
	and Debtor 2 only	Taxes and certain other debts you	u owe the government		
_	one of the debtors and another	Claims for death or personal injur	-		
☐ Check i	f this claim is for a community debt	intoxicated	y withe you were		

No Yes

Is the claim subject to offset?

Other, Specify

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Det	btor 1	Jeffrey M	Roberts Middle Name	Last Name	Case number (d s	viowi)	
Pa	art 2:	List All of \	our NONPRIC	RITY Unsecured Claims	ì		
3.	Do any	creditors hav	ve nonpriority u	nsecured claims against yo	1:7		
					e court with your other schedules.		
4.	included	ity unsecured Lin Part 1. If n	claim, list the cri	editor separately for each clair editor holds a particular claim,	order of the creditor who holds entering the creditor who holds entering what is the other creditors in Part 3.If you	at tune of claim it is. Do no	that alaima also ad.
	٦ ١						Total claim
4.1	Nonprior	ity Creditor's Nam	alth Car	e RX	Last 4 digits of account number		s107.60
	Number	Box Street			When was the debt incurred?	5/2018	
	Car	ol Str	eam, IL	60197-5840 State ZIP Code	As of the date you file, the claim	in Ober allah i	
	O,			Sigle Zir Code		is: Check all that apply.	
	Who in	curred the de	bt? Check one.		Contingent Unliquidated		
		otor 1 only			☐ Disputed		
		otor 2 only otor 1 and Debto	ur Danalu		Town of NONDBIODITY		
			debtors and anothe	r	Type of NONPRIORITY unsecu	red claim:	
	☐ Che	ck if this clai	m is for a commu	inity debt	Obligations arising out of a separa	ation agreement or divorce	
		laim subject t		• • • •	that you did not report as priority of Debts to pension or profit-sharing	claims	
	OX No □ Yes				Other, Specify RX Insu	rpans, and other similar debti	S
	and the second second	- North and the American Control	to an order of the state of the	min to the source of the sourc	enter de la companya		
4.2		nn Tayl			Last 4 digits of account number	5202	\$ 708.22
			cutive Pa	arkway	When was the debt incurred?	12/2017	
	We		le, OH	43081	As of the date you file, the claim i	is: Check all that apply.	
	City			State ZIP Code	Contingent		
		curred the del	ot? Check one.		Unliquidated		
		tor 1 only for 2 only			☐ Disputed		
	C≱ Debt	or 1 and Debtor			Type of NONPRIORITY unsecur	ed claim:	
	At le	ast one of the d	ebtors and another		☐ Student loans		
	Che	ck if this clain	n is for a commu	nity debt	Obligations arising out of a separa that you did not report as priority of	tion agreement or divorce	
		laim subject to	o offset?		Debts to pension or profit-sharing i	plans, and other similar dehis	
	No Yes				Other Specify Company	<u>Credit Card</u>	
	Carrie - Description			s e a company and a company	400		
4.3		ital Or	ne Bank		Last 4 digits of account number	8683	6740 46
		. Box 6	102		When was the debt incurred?	5/2016	<sub>\$</sub> 6749.46
	Number	Street		: 0.1.0F			
	Car	ol Stre	eam IL (	50197-6492 Slate ZIP Code	As of the date you file, the claim is	: Check all that apply.	
	Who inc	urred the deb	t? Check one.		Contingent		
	Debto				Unliquidated		
	Debto	or 2 only			☐ Disputed		
	Debto	or 1 and Debtor :	2 only btors and another		Type of NONPRIORITY unsecure	ed claim:	
				an deta	Student loans		
			is for a commun	ity debt	Obligations arising out of a separati that you did not report as priority cla	ion agreement or divorce	
	is the cla	nim subject to	offset?		Debts to pension or profit-sharing pl	lans, and other similar debts	
	Yes				Other Specify Credit C	Lard	

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Del	btor 1	Jeffrey M Roberts	Case number (if his	nown)	
		First Name Middle Name Last Name		· · · · · · · · · · · · · · · · · · ·	
Pa	art 2:	List All of Your NONPRIORITY Unsecured Clair	ms		
3.		creditors have nonpriority unsecured claims against			
:	☐ No. ☐ Yes	You have nothing to report in this part. Submit this form to	o the court with your other schedules.		
4.	included	of your nonpriority unsecured claims in the alphabeting unsecured claim, list the creditor separately for each of all the part 1. If more than one creditor holds a particular claim out the Continuation Page of Part 2.	daim. For each claim listed, identify who	if type of claim it is. Do no	t liet claime already
r	ጎ				Total claim
4 1		oital One Bank	Last 4 digits of account number	<u>4553</u> _	s 11,732.97
	•	0. Box 6492	When was the debt incurred?	12/2016	\$ <u>21,732.5</u> 7
	Number		<del></del>		
	City	rol Stream, IL 60197-6492	As of the date you file, the claim	is: Check all that apply.	
			☐ Contingent		
		ncurred the debt? Check one.	Unliquidated		
		btor 1 only btor 2 only	☐ Disputed		
	<b>⅓</b> Del	btor 1 and Debtor 2 only	Type of NONPRIORITY unsecu	red claim:	
	<b>□</b> At l	east one of the debtors and another	☐ Student loans		
	☐ Ch	eck if this claim is for a community debt	Obligations arising out of a separa that you did not report as priority of	ation agreement or divorce	
		claim subject to offset?	Debts to pension or profit-sharing	plans, and other similar debts	<b>i</b>
	☐ No ☐ Yes		O Other, Specify Credit (	Card	
l	1	en e	en erene en		
4.2		son Pirie Scott	Last 4 digits of account number		s 229.26
	-	ily Creditor's Name	When was the debt incurred?	2/2018	
	Number	0.Box 659813 Street			
	San	Antonio, TX 78265-9113	As of the date you file, the claim is	s: Check all that apply	
	•	State ZIP Code	Contingent		
		curred the debt? Check one. otor 1 only	Unliquidated Disputed		
		oter 2 only	bispated		
		stor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	ed claim:	
		east one of the debtors and another	Student loans		
	Che Che	eck if this claim is for a community debt	Obligations arising out of a separat that you did not report as priority cl	tion agreement or divorce aims	
	is the c ☑ No	laim subject to offset?	Debts to pension or profit-sharing p	lans, and other similar debts	
	Yes		☑ Other Specify <u>Credit</u> (	ard	
4.3	Cha	se Freedom Card	· · · · · · · · · · · · · · · · · · ·		
L		se Freedom Card y Creditor's Name	Last 4 digits of account number	0698	s 4641.41
	P.O	. Box 1423	When was the debt incurred?		•
		rlotte, NC 28201-1423			
	City	State ZIP Code	<ul> <li>As of the date you file, the claim is</li> </ul>	: Check all that apply.	
		curred the debt? Check one.	Contingent		
	Debt		Unliquidated Disputed		
	Debte	or 2 only or 1 and Debtor 2 only			
	☐ At lea	ast one of the debters and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Chec	ck if this claim is for a community debt	Student loans		
		aim subject to offset?	Obligations arising out of a separation that you did not report as priority cla	ims	
	Ø No	•	Debts to pension or profit-sharing pl  Other Specify Credit Ca	ans, and other similar debts	
	☐ Yes		- Other Specify CTECTC Co	ILU	

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Del	otor 1 Jeffrey M Roberts First Name Middle Name Last Name	Case number (d known)	
Pa	it 2: List All of Your NONPRIORITY Unsecured Claim	as .	
3.	Do any creditors have nonpriority unsecured claims against ye	ou?	
	No. You have nothing to report in this part. Submit this form to a Yes	the court with your other schedules.	
4.		al order of the creditor who holds each claim. If a creditor has more than one nim. For each claim listed, identify what type of claim it is. Do not list claims already n, list the other creditors in Part 3.If you have more than three nonpriority unsecured	, d
4.1	_Chase Ink Card	Total claim  Last 4 digits of account number 5456	
	Nonpriority Creditor's Name P.O. Box 15123	When was the debt incurred? 9/2017	<u>)                                    </u>
	Number Street Wilmington DE 19850-5123		
	City State ZiP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?  ☑ No □ Yes	Debts to pension or profit-sharing plans, and other similar debts  Other Specify Credit Card	
4.2	Citi Cards	1420	
L	Nonpriority Creditor's Name P.O. Box 9001016	Last 4 digits of account number $1432$ $$5236.95$ When was the debt incurred? $5/2017$	
	Number Street Louisville, KY 40290-1016	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.  Debtor 1 only	Unliquidated Disputed	
	Debtor 2 only	•	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	☑ No	☐ Debts to pension or profit-sharing plans, and other similar debts  ☑ Other. Specify <u>Credit Card</u>	
	Yes		
4.3	Discover Nonprionly Creditor's Name	Last 4 digits of account number 1976	
_	P.O. Box 6103	When was the debt incurred?	
	Number Street Carol Stream, IL 60197-6103		
	City State Z/P Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. ☐ Debtor 1 only	Contingent Unliquidated	
(	Debtor 2 only	Disputed	
Č	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	s the claim subject to offset? X <sub>No</sub>	that you did not report as priority claims  Debts to pension or profit-sharing claims, and other similar debts.	
	Yes	Other Specify Credit Card	

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Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than on nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    Total claims fill out the Continuation Page of Part 2.					
No. You have nothing to report in this part. Submit this form to the court with your other schedules.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than on nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims all included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unseculars fill out the Continuation Page of Part 2.  Total claim 1. J. Jill (Comity Capital Bank)  Last 4 digits of account number 8545 539.5  P.O. Box 183003  When was the debt incurred? 6/15/2015  Number Street  Columbus, OH 43218-3003  City State ZiP Code As of the date you file, the claim is: Check all that apply Unlequidated  Unlequidated  Unlequidated  Unlequidated  Disputed  Consingent  Unlequidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Is the claim subject to offset?  As of the date you did not report as priority claims  Is the claim subject to offset?  Others. Specify Credit Card  When was the debt incurred? 3/2018  Last 4 digits of account number 74-90 509.4  When was the debt incurred? 3/2018	<del></del>				
No. You have nothing to report in this part. Submit this form to the court with your other schedules.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than on nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims all included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unseculars fill out the Continuation Page of Part 2.  Total claim 1. J. Jill (Comity Capital Bank)  Last 4 digits of account number 8545 539.5  P.O. Box 183003  When was the debt incurred? 6/15/2015  Number Street  Columbus, OH 43218-3003  City State ZiP Code As of the date you file, the claim is: Check all that apply Unlequidated  Unlequidated  Unlequidated  Unlequidated  Disputed  Consingent  Unlequidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Is the claim subject to offset?  As of the date you did not report as priority claims  Is the claim subject to offset?  Others. Specify Credit Card  When was the debt incurred? 3/2018  Last 4 digits of account number 74-90 509.4  When was the debt incurred? 3/2018					
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than on nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims all included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unseclaims fill out the Continuation Page of Part 2.  Total claim  J_Jill (Comity Capital Bank)  Last 4 digits of account number 8545					
included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unse claims fill out the Continuation Page of Part 2.  Total claim  J. Jill (Comity Capital Bank)  Nonpriority Creditor's Name  P.O. Box 183003  When was the debt incurred? 6/15/2015  When was the debt incurred? 6/15/2015  When was the debt incurred? 6/15/2015  As of the date you file, the claim is: Check all that apply  Contingent Unfiquidated Disputed  Unfiquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset?  Nonpriority Creditor's Name  As of the date you file, the claim is: Check all that apply Contingent Unfiquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is the claim is the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Contingent Contingent Check if this claim is: Check all that apply Contingent Check if this claim is: Check all that apply Contingent					
Last 4 digits of account number   8545   539.5	ne eady cured				
P.O. Box 183003  Number Street  Columbus, OH 43218-3003  City State ZiP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Mutual of Omaha  As of the date you file, the claim is: Check all that apply Contingent Dublindiated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  As of the date you file, the claim is: Check all that apply Contingent Dubliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  As of the date you file, the claim is: Check all that apply Contingent Unhquidated Disputed  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  As of the date you file, the claim is: Check all that apply Contingent Disputed  Student loans Colligations Contingent C					
Number Street  Columbus, OH 43218-3003  City State ZIP Code  As of the date you file, the claim is: Check all that apply  Contingent Unhiquidated Unhiquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Mutual of Omaha  Nonpriority Creditor's Name 330 Mutual Of Omaha Plaza Number Street  As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unhiquidated	3				
City  State  ZIP Code  As of the date you file, the claim is: Check all that apply.  Contingent  Unhiquidated  Unhiquidated  Disputed  Type of NONPRIORITY unsecured claim:  At least one of the debtors and another  Check if this claim is for a community debt  is the claim subject to offset?  No  Yes   Mutual of Omaha  Nonpriority Creditor's Name  330 Mutual Of Omaha  Number Street  No Contingent  Unhiquidated  Unhiquida					
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Street  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  Mutual of Omaha Last 4 digits of account number 74-90 Solven was the debt incurred? 3/2018  When was the debt incurred? 3/2018					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 3 ho Student toans Debtor 4 and Debtor 2 only Debtor 5 harme Street  Unhiquidated Disputed  Type of NONPRIORITY unsecured claim: Student toans Debtor 6 nonPriority unsecured claim: Disputed  Type of NONPRIORITY unsecured claim: Student toans Debtor 1 and Debtor 2 only  Type of NONPRIORITY unsecured claim: Debtor 3 student toans Debtor 3 student toans Debtor 4 a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  Autual of Omaha  Last 4 digits of account number 74-90 Shopping 1 and 1 a					
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed  Type of NONPRIORITY unsecured claim: Debtor 2 only Disputed  Disputed  Type of NONPRIORITY unsecured claim: Debtor 2 only Disputed  Disputed  Type of NONPRIORITY unsecured claim: Debtor 2 only Disputed  Disputed  Debtor 2 only Disputed  Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 o					
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ Yes □ Mutual of Omaha □ Mutual Of Omaha □ Mutual Of Omaha Plaza □ Number Street □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card □ Student loans □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card □ Student loans □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card □ Student loans □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card □ Student loans					
At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes  At least one of the debtors and another  Student toans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  At least 4 digits of account number 74-90 Sharing plans, and other similar debts Other. Specify Credit Card  Last 4 digits of account number 74-90 Sharing plans, and other similar debts Other. Specify Credit Card  When was the debt incurred? 3/2018					
Check if this claim is for a community debt  Is the claim subject to offset?  A No  Yes  Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  A Mutual of Omaha  Nonpnonty Creditor's Name  330 Mutual Of Omaha Plaza  Number Street  Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  Last 4 digits of account number 74 - 90  When was the debt incurred? 3/2018					
that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card  Autual of Omaha  Nonpriority Creditor's Name  330 Mutual Of Omaha Plaza  Number Street  That you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card  Last 4 digits of account number 74 - 90 s 609.4  When was the debt incurred? 3/2018					
Mutual of Omaha  Nonpriority Creditor's Name  330 Mutual Of Omaha Plaza  Number Street  A other. Specify Credit Card  Last 4 digits of account number 74-90 s 609.4					
Mutual of Omaha  Nonpriority Creditor's Name  330 Mutual Of Omaha Plaza  Number Street  Mutual of Omaha Plaza  Number Street  Last 4 digits of account number 74-90  When was the debt incurred? 3/2018					
Nonpriority Creditor's Name  330 Mutual Of Omaha Plaza  Number Street  Number Street  Number Street  Number Street  Last 4 digits of account number /4-90 s 609.4					
330 Mutual Of Omaha Plaza  Number Street  When was the debt incurred? 3/2018					
City Charter is. Check as that apply.					
State ZIP Code Contingent					
Who incurred the debt? Check one.  Unliquidated  Disputed					
Debtor 2 only					
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Styleast tree.					
Check if this claim is for a community debt  Student loans Obligations arising out of a separation agreement or divorce					
that you did not report as priority claims					
Of Other Specify McGi Care and other similar debts					
the Allahora and a second and a					
Nordstrom's					
Nonpriority Creditor's Name  P.O. Box 79139-9139  Last 4 digits of account number 6175  When was the debt incurred?	2				
Number Street					
Phoenix AZ 85062-9139  City State ZIP Code As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.					
☐ Debtor 1 only ☐ Unliquidated ☐ Debtor 2 only ☐ Disputed					
Debtor 1 and Debtor 2 only					
At least one of the debtors and another  Type of NONPRIORITY unsecured claim:					
	D Student loans				
Is the claim subject to offset?  Unique to that you did not report as priority claims					
No Debts to pension or profil-sharing plans, and other similar debts  Yes 2 Other. Specify <u>Credit</u> Card					

4	Jeffrey M Roberts	
tor 1	First Name Middle Name Last Name	Case number (if known)
rt 3:		
(60)	List Others to Be Notified About a Debt 1	That You Already Listed
2. then I	ist the collection agency boro Similarly it	out your bankruptcy, for a debt that you already listed in Parts 1 or 2. For a you for a debt you owe to someone else, list the original creditor in Parts 1 or have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ersons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	The state of the s	On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured Cla
	110000	Last 4 digits of account number
City	State ZIP Code	and a management of the contract of the contra
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Number		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	Claims Part 2: Creditors with Nonpriority Unsecured
City	State ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1; Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured
·····		Claims
City	State ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Number	Street	Claims  Part 2: Creditors with Nonpriority Unsecured
		Last 4 digits of account number

Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor?

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 2: Creditors with Nonpriority Unsecured

Part 2: Creditors with Nonpriority Unsecured

☐ Part 2: Creditors with Nonpriority Unsecured

Number

City

Name

Number

Name

Claims

Claims

Claims

ZIP Code

State

State

Last 4 digits of account number \_

Last 4 digits of account number

Last 4 digits of account number

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ebtor 1	Jef First	frey M Roberts Name Midde Name Last Name			Case num	ber (if known)	
art 4: A	dd	the Amounts for Each Type of Unsecured Clair	n				
Total the Add the a	amo	ounts of certain types of unsecured claims. This infor ounts for each type of unsecured claim.	mation	is	for statistical re	porting purpo	ses only. 28 U.S.C. § 159.
					Total claim		
otal claims	6a	. Domestic support obligations	6a.		\$	0.00	
ип Рап 1	6b	. Taxes and certain other debts you owe the government	6b.		\$	0.00	
	6с	Claims for death or personal injury while you were intoxicated	6c.		•	0.00	
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.		~ \$	0.00	
	6e.	Total. Add lines 6a through 6d.	6e.		\$	0.00	
					Total claim		
al claims	6f.	Student loans	6f.		\$		
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$	0.00	

6]. Total. Add lines 6f through 6i.

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Fill in this	information to identify your case:	
Debtor	Jeffrey M Roberts	
	First Name Middle Name Last Name Delores M Roberts	And the state of t
Debtor 2 (Spouse If filing		
United States	s Bankruptcy Court for the: Northern District of Florida	
Case number		
(if known)		☐ Check if this is an
		amended filing
Off: -: -1 :	E 4000	
	Form 106G	
Sched	ule G: Executory Contracts	and Unexpired Leases 12/15
1. Do you I  No. C  Yes.  2. List sepa	have any executory contracts or unexpired leases?  Check this box and file this form with the court with your othe  Fill in all of the information below even if the contracts or lea  arately each person or company with whom you have the  trent, vehicle lease, cell phone). See the instructions for the	out, number the entries, and attach it to this page. On the top of any  r schedules. You have nothing else to report on this form. ses are listed on Schedule A/B: Property (Official Form 106A/B).  e contract or lease. Then state what each contract or lease is for (for his form in the instruction booklet for more examples of executory contracts and
	or company with whom you have the contract or lease Financial Services	State what the contract or lease is for
Name	Financial Services	Lease on the 2015 Lexue ES-350
PO Bo		
Number Carol S	Street Stream IL 60197	
City	State ZIP Code	
2.2	the state of the s	
Name		the same of the sa
, valine		
Number	Street	
City	Chata ZID Co. I	
.3.	State ZIP Code	the transfer of the control of the c
Name		·····
ivaine		
Number	Street	
0.1.		
City	State ZIP Code	
.4		
Name		
Number	Street	***************************************
-		
City	State ZIP Code	
5		
Name		And Andrea
Number	Street	
City	State ZIP Code	

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Fill in this information to identify your case		
Debtor 1 Jeffrey M Roberts		
First Name Middle Na	me Last Name	···········
Debtor 2 Delores M Roberts (Spouse, if filing) First Name Middle Nai	me Last Name	Anthrope
United States Bankruptcy Court for the: Northern D	vistrict of Illinois	
Case number		
(if known)		Check if this is an
		amended filing
Official Form 106H		
Schedule H: Your Code	ebtors	12/15
are filing together, both are equally responsi	ble for supplying correct informate aft. Attach the Additional Page to	ve. Be as complete and accurate as possible. If two married people ion. If more space is needed, copy the Additional Page, fill it out, this page. On the top of any Additional Pages, write your name and
Do you have any codebtors? (If you are file       No	ling a joint case, do not list either sp	ouse as a codebtor.)
Yes		
2. Within the last 8 years, have you lived in Arizona, California, Idaho, Louisiana, Nevad	a community property state or te	rritory? (Community property states and territories include
☐ No. Go to line 3.		<b>3</b> ,,
Yes. Did your spouse, former spouse, o	r legal equivalent live with you at th	e time?
□ No		
Yes. In which community state or te	rritory did you live?	. Fill in the name and current address of that person.
Name of your spouse, former spouse, or legal	equivalent	-
Number Street	Partition of the state of the s	WWW.
City	State ZIP Cod	Andrewinderspringerspr
shown in line 2 again as a codebtor only	if that person is a guarantor or colle E/F (Official Form 106E/F), or S	debtor if your spouse is filing with you. List the person osigner. Make sure you have listed the creditor on ochedule G (Official Form 106G). Use Schedule D,
Column 1: Your codebtor		Column 2. The anality to the state of the st
Soldini / Tour codebior		Column 2: The creditor to whom you owe the debt
3.1		Check all schedules that apply:
Name		Schedule D, line
		Schedule E/F, line
Number Street		☐ Schedule G, line
City	State ZIP Co	de
3.2		D. Schodulo D. lina
Name		Schedule D, line
Number Street		☐ Schedule G, line
City	State ZIP Co	
3.3		
Name		Schedule D, line
Number Street		Schedule E/F, line
		☐ Schedule G, line
City	State ZIP Co	de

Schedule H: Your Codebtors

Official Form 106H

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Fill in this informa	ition to identify	your case:							
	ey M Robert								
Debtor 2 Del	™ ores M Robe	Middle Name Prts	Last Name						
(Spouse, if filing) First Na		Middle Name	Last Name						
	otcy Court for the:	Northern District of Illinois							
Case number (If known)	······				1	heck if th			
							ended filing ement showing	nostnetition	chanter 13
,					-		as of the follow		Grapter 13
Official Form						MM / DD	)/ YYYY		
Schedule	e I: You	ır Income							12/15
supplying correct in if you are separated separate sheet to the	iformation. If y l and your spoi	ossible. If two married pec ou are married and not fili use is not filing with you, o top of any additional pag	ng jointly, and ye do not include in	our sp	ouse is livit	ng with yo	ou, include informate, informate, informate, informate, informate, informate, informate, informate, informat	nation about	your spouse.
1. Fill in your empl	oyment		Datisans				<b>.</b>		
information.  If you have more	than one ich		Debtor 1	~3>0/48pmlp/b/b/dlarcts	enteriory and immunitative and analysis of the	9*************************************	Debtor 2 or n	on-filing spo	use •••••••••••••
attach a separate information about employers.	page with	Employment status	☐ Employed ☑ Not employ	yed			☐ Employed ☑ Not emplo		,
Include part-time,			,				•	•	:
self-employed wo Occupation may i or homemaker, if	nclude student	Occupation			***************************************				PROVIDENCE
		Employer's name	Wall the same of t						
		Employer's address							
		, ,	Number Street			***************************************	Number Street		
			ARMANANANANANANANANANANANANANANANANANANA		M15-4-1-1	<u>_</u>	****	1	
			City	State	ZIP Code		City	State ZI	P Code
		How long employed there	e?	_					
Part 2: Give I	etails About	Monthly Income							
spouse unless you	ı are separated.								non-filing
below. If you need	more space, at	ive more than one employer tach a separate sheet to this	s form.	omado	n ior all emp	ployers for	that person on the	e lines	
				*	For Deb	tor 1	For Debtor 2 or non-filing spou		
List monthly gro deductions). If no	oss wages, sala ot paid monthly,	ary, and commissions (beficalculate what the monthly v	ore all payroll wage would be.	2.	\$	<del></del>	\$	***************************************	· ·
3. Estimate and lis	t monthly over	time pay.		3	+\$		+ \$	_	:
4. Calculate gross	income. Add lir	ne 2 + line 3.		4.	\$		\$		:

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Debtor	1 Jeffrey M Roberts First Name Middle Name Last Name	÷	Case number (if koo	own)	
			For Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here	<b>→</b> 4.	\$	\$	
5. <b>Lis</b>	t all payroli deductions:				
	a. Tax, Medicare, and Social Security deductions	5a.	r.	er.	
	Mandatory contributions for retirement plans	5a.	T	\$ \$	
	Voluntary contributions for retirement plans	5c.		\$	
	Required repayments of retirement fund loans	5d.		\$	
5€	e. Insurance	5e.		\$	
5f	Domestic support obligations	5f.	\$	\$	
50	. Union dues	5g.	\$	\$	
5h	a. Other deductions. Specify;	5h.	+\$	+ \$	
6. <b>A</b> (	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	\$	
7. <b>C</b> a	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
8. Lis	t all other income regularly received:				
8a	Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8t	Interest and dividends	8b.	\$	\$	
8c	Family support payments that you, a non-filing spouse, or a dependence regularly receive	nt		***************************************	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
	Unemployment compensation	8d.	\$	\$	
	Social Security	8e.	\$ <u>2,001.00</u>	\$ <u>1.119.00</u>	
81.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	ce 8f.	\$	\$	
8a	Pension or retirement income	8g.	¢	Φ.	
~	Other monthly income. Specify: Self Employed Work		Ψ	3.50.00	
	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	8h. 9.	\$ 2,001.00	+\$ 750.00 \$ 1,869.00	
	culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_2,001.00	- \$ 1,869.00 <b>=</b>	\$ 3,870.00
Incl	te all other regular contributions to the expenses that you list in Schedude contributions from an unmarried partner, members of your household, youngstood or relatives.			nmates, and other	
Do	not include any amounts already included in lines 2-10 or amounts that are n	ot av	vailable to pay expens	es listed in Schedule J.	
Spe	cify:			11. 🛨	\$0.00
2. <b>Adc</b> Writ	I the amount in the last column of line 10 to the amount in line 11. The refer that amount on the Summary of Your Assets and Liabilities and Certain St	esult atisti	t is the combined mon	thly income.	\$ 3,870.00
					Combined
13. <b>Do</b>	you expect an increase or decrease within the year after you file this fo	rm?	•		monthly income
	No. Yes. Explain:				

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Fill in this information to identify you	Ir caso:			
	in construction of the second	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
Debtor 1 Jeffrey M Roberts First Name	Middle Name Last Name	Check if this	is:	
Debtor 2 Delores M Roberts (Spouse, if filing) First Name	Middle Name Last Name	An amend	ded filing	
United States Bankruptcy Court for the: Nor			nent showing post as of the following	petition chapter 13
Case number (If known)	***************************************	MM / DD /		g <b>GG</b> (G).
The state of the s				
Official Form 106J				
Schedule J: Your	Expenses			12/15
Be as complete and accurate as possi information. If more space is needed, (if known). Answer every question.	ble. If two married people are fili attach another sheet to this form	ng together, both are equally resp n. On the top of any additional pag	oonsible for supply ges, write your nam	ing correct e and case number
Part 1: Describe Your Housel	hold			
1. Is this a joint case?				
☐ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a sepa	rate household?			
☑ No				
☐ Yes. Debtor 2 must file Of	ficial Form 106J-2, Expenses for S	eparate Household of Debtor 2.	management of the state of the	
2. Do you have dependents?	¶ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents' names.				☐ No ☐ Yes
				☐ No ☐ Yes
				☐ No
			RATE AND ADDRESS OF THE PARTY O	Yes
				☐ No
				☐ Yes
				☐ No ☐ Yes
yourself and your dependents?	No I Yes			
Part 2: Estimate Your Ongoing				
Estimate your expenses as of your ban expenses as of a date after the bankrup applicable date.				
Include expenses paid for with non-cas	sh government assistance if you	know the value of		
such assistance and have included it o			Your exper	ises
<ol> <li>The rental or home ownership expe any rent for the ground or lot.</li> </ol>	nses for your residence. Include	first mortgage payments and	4. \$	1,883.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or renter	r's insurance		4b. \$	
4c. Home maintenance, repair, and i	· · ·		4c. \$	
4d. Homeowner's association or con	dominium dues		4d. \$	325.00

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Debtor 1

Jeffrey M Roberts
First Name Middle Name

Middle Name Last Name

Case number (if known)\_\_\_\_

			Your expe	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	50.00
6.		<b>.</b>		
٠.	6a. Electricity, heat, natural gas	6a.	\$	175.00
	6b. Water, sewer, garbage collection	6b.	\$	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	320.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	
10.	Personal care products and services	10.	\$	
11.	Medical and dental expenses	11.	\$	
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	220.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	50.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	383.00
	15c. Vehicle insurance	15c.	\$	160.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: Self Employed SS	16.	\$	43.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	253.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: Lease not to be reaffirmed	17c.	\$	535.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1 Jeffrey M Roberts Case First Name Middle Name Last Name	number (d known)	
Other. Specify:	21. <b>+</b> \$	0.00
Calculate your monthly expenses.		
22a. Add lines 4 through 21.	22a. \$	5,173.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. \$	0.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <b>\$</b> _	5,173.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	3,870.00
23b. Copy your monthly expenses from line 22c above.	23b. — \$	5,173.00
23c. Subtract your monthly expenses from your monthly income.		-1,303.00
The result is your monthly net income.	23c.	
Do you expect an increase or decrease in your expenses within the year after you file this	s form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortg		
□ No.		
Yes. Explain here: We are not reaffirming the Car Lease of 535.00, reducir and trying to secure some w2 income.	ng our cable and te	elephone by 200.00

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Il in this information to identify your case:		
ebtor 1 Jeffrey M Roberts First Name Middle Name	Last Name	
ebtor 2 Delores M Roberts Douse, if filing)  First Name Middle Name		
ited States Bankruptcy Court for the: Northern District of Illino	Last Name	
se number	**	
known)		eck if this is
		ended filing
Official Form 106Dec		
<b>Declaration About an In</b>	dividual Debtor's Schedules	12/15
f two married people are filing together, both are equa	ally responsible for supplying correct information. Schedules or amended schedules. Making a false statement, concealing pro	
Sign Below		
Sign Below  Did you pay or agree to pay someone who is NOT a		
Sign Below  Did you pay or agree to pay someone who is NOT a		,
Did you pay or agree to pay someone who is NOT a	Attach Bankruptcy Petition Preparer's Notice, Declaration, and	,
Sign Below  Did you pay or agree to pay someone who is NOT at the solution of person.  Under penalty of perjury, I declare that I have read to the solution of person.	Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
Sign Below  Did you pay or agree to pay someone who is NOT a  ✓ No  ☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
Sign Below  Did you pay or agree to pay someone who is NOT at the last of person who is NOT at the	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  The summary and schedules filed with this declaration and	
Sign Below  Did you pay or agree to pay someone who is NOT at No No Not Not Not Not Not Not Not Not	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  The summary and schedules filed with this declaration and	

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Bankruptcy Matrix

United Health Care RX P.O. Box 5840 Carol Stream, IL 60197-5840

Ann Taylor 4079 Executive Parkway Westerville, OH 43081

Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492

Capitol One Bank P.O. Box 6492 Carol Stream, IL 60197-6492

Carson Pirie Scott P.O. Box 659813 San Antonio, TX 78265

Chase Freedom Card P.O. Box 1423 Charlotte, NC 28201-1423

Chase Ink Card P.O. Box 15123 Wilmington, DE 19850-5123

Citi Card P.O. Box 9001016 Louisville, KY 40290-1016

Discover P.O. Box 6103 Carol Stream, IL 60197-6103

J.Jill (Comity Capital Bank) P.O. Box 183003 Columbus, OH 43218-3003

Mutual of Omaha 330 Mutual of Omaha Plaza Omaha, NE 68175

Nordstrom's P.O. Box 79139-9139 Phoenix, AZ 85062-9139

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Fill in this information to identify your case:							
Debtor 1 Jeffrey M Roberts		<u>_</u>	, 3 N N				
First Name Middle Name Debtor 2 Delores M Roberts		Last Name					
Spouse, if filing) First Name Middle Name		Last Name					
United States Bankruptcy Court for the: Northern District of	Illinois						
ase number if known)						1	☐ Check if this is ar
							amended filing
fficial Form 107							
tatement of Financial Affair	rs fo	r Indiv	/id	uals Filing	for Ba	nkruptcy	<b>y</b> 04/1
as complete and accurate as possible. If two marr	ied peop	ole are filing	g tog	ether, both are equa	lly respons	ible for supply	ng correct
ormation. If more space is needed, attach a separa mber (if known). Answer every question.	ite shee	t to this for	m. O	n the top of any add	itional page	es, write your n	ame and case
art 1: Give Details About Your Marital Sta	tus and	Where Y	ou L	ived Before			
What is your current marital status?							
Married							
Not married							
During the last 3 years, have you lived anywhere	other th	an where y	ou li	ve now?			
☑ No							
Yes. List all of the places you lived in the last 3 y	ears. Do	not include	e whe	re you live now.			
Debtor 1:	Dates lived	Debtor 1	De	btor 2:			Dates Debtor 2 lived there
			í <b>X</b> 1	2			
130 Chambord Court		10/00		Same as Debtor 1			Same as Debtor 1
Number Street		10/20	05	Number Street			From
	То	**************************************					То
Bloomingdale, IL 60108	}						
City State ZIP Code				City	State	ZIP Code	
				Same as Debtor 1			Same as Debtor 1
							From
	From			Number Street		•	To
Number Street	From To						
Number Street							and the state of t
				04			
Number Street City State ZIP Code				City	State	ZIP Code	
City State ZIP Code  Within the last 8 years, did you ever live with a sp	To	legal equiv	valen	t in a community pro	perty state	or territory? (C	Community property
City State ZIP Code  Within the last 8 years, did you ever live with a sp states and territories include Arizona, California, Idah	To	legal equiv ana. Nevad	valen	t in a community pro	perty state	or territory? (C	Community property Wisconsin.)
City State ZIP Code  Within the last 8 years, did you ever live with a sp	To  ouse or  o, Louis	ana. Nevad	<b>ralen</b> la, No	t in a community pro ew Mexico. Puerto Ric	perty state	or territory? (C	Community property Wisconsin.)
City State ZIP Code  Within the last 8 years, did you ever live with a sp states and territories include Arizona, California, Idah  No	To  ouse or  o, Louis	ana. Nevad	<b>ralen</b> la, No	t in a community pro ew Mexico. Puerto Ric	perty state	or territory? (C	Community property Wisconsin.)

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Debtor 2	Jeffrey M Roberts					
	First Name Middle Name Delores M Roberts	Las	st Name			
Spouse, if filing)		Las	st Name			
nited States E	Bankruptcy Court for the: Northern District of Ill	inois				
ase number		<del></del>			Г	Check if this is
					_	amended filing
	orm 107					
tatem	ent of Financial Affair	s tor	Indivi	duals Filing	for Bankruptcy	04
	te and accurate as possible. If two marrie f more space is needed, attach a separat					
	r more space is needed, attach a separati own). Answer every question.	e sheet t	o this forn	n. On the top of any add	itional pages, write your na	ime and case
art 1: G	ive Details About Your Marital Statu	ıs and V	Nhere Yo	u Lived Before		
What is y	our current marital status?					
Z Marrie						
☐ Not m						
. During the	e last 3 years, have you lived anywhere o	ther than	n where yo	u live now?		
Ø No			•			
🔲 Yes. L	ist all of the places you lived in the last 3 ye	ars. Do n	not include	where you live now.		
			5 . 6 4 4			
Deb	tor 1:	Dates [ lived th		Debtor 2:		Dates Debtor 2 lived there
Deb	tor 1:			Debtor 2:  Same as Debtor 1		
	or1: 30 Chambord Ct.	lived th	nere 10/20(	Same as Debtor 1		lived there  Same as Debto
	30 Chambord Ct.	lived th	nere 10/20(	Same as Debtor 1	a Market de Market	lived there
_13	30 Chambord Ct.	From	nere 10/20(	Same as Debtor 1		lived there  Same as Debto
13 Num B	30 Chambord Ct.  Bloomingdale, IL 60108	From To	nere 10/20(	Same as Debtor 1		lived there  Same as Debto
	30 Chambord Ct.	From To	nere 10/20(	Same as Debtor 1	State ZIP Code	lived there  Same as Debto
13 Num B	30 Chambord Ct.  Bloomingdale, IL 60108	From To	nere 10/20(	Same as Debtor 1  ) 5  nt Number Street	State ZIP Code	Iived there  Same as Debto  From  To
13 Num B	30 Chambord Ct.  Bloomingdale, IL 60108	From To	nere 10/20(	Same as Debtor 1  D 5  Number Street  City	State ZIP Code	FromToTo
13 Num B	30 Chambord Ct.  Street  loomingdale, IL 60108  State ZIP Code	From To	nere 10/20(	Same as Debtor 1  D 5  Number Street  City	State ZIP Code	Iived there  Same as Debto  From  To
13 Num B	30 Chambord Ct.  Street  loomingdale, IL 60108  State ZIP Code	From .	nere 10/20(	Same as Debtor 1  D 5  Number Street  City  Same as Debtor 1	State ZIP Code	From  Same as Debto  From  To  Same as Debto
Num B.	30 Chambord Ct.  Street  loomingdale, IL 60108  State ZIP Code	From .	nere 10/20(	Same as Debtor 1  D 5  Number Street  City  Same as Debtor 1	State ZIP Code	Same as Debto From To  Same as Debto From
Num B.	30 Chambord Ct.  Street  loomingdale, IL 60108  State ZIP Code	From .	nere 10/20(	Same as Debtor 1  D 5  Number Street  City  Same as Debtor 1	State ZIP Code	From  Same as Debto  From  To  Same as Debto
13 Num B City	30 Chambord Ct.  Street  loomingdale, IL 60108  State ZIP Code	From 5	10/200 Prese	Same as Debtor 1  O 5  nt Number Street  City  Same as Debtor 1  Number Street	State ZIP Code	From  Same as Debto  From  To  Same as Debto  From  To
13 Num B: City  City  Within the	30 Chambord Ct.    Street	From From To To From From From From From From From Fro	10/200 Preser	Same as Debtor 1  O 5  nt Number Street  City  Same as Debtor 1  Number Street  City  City  alent in a community pro-	State ZIP Code	From To
13 Num B: City  City  Within the	State ZIP Code  State ZIP Code	From From To To From From From From From From From Fro	10/200 Preser	Same as Debtor 1  O 5  nt Number Street  City  Same as Debtor 1  Number Street  City  City  alent in a community process.	State ZIP Code	From To
Num  B: City  Num  City  Within the states and	State ZIP Code  State ZIP Code	From To To Duse or le	egal equiva	Same as Debtor 1  O 5  O T Number Street  City  Same as Debtor 1  Number Street  City  City  Alent in a community property as New Mexico, Puerto Rich	State ZIP Code	From To
Num  B: City  Num  City  Within the states and	State ZIP Code	From To To Duse or le	egal equiva	Same as Debtor 1  O 5  O T Number Street  City  Same as Debtor 1  Number Street  City  City  Alent in a community property as New Mexico, Puerto Rich	State ZIP Code	From To

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btor 1	Jeffrey M Roberts First Name Middle Name Las	t Name	Case n	number (d known)	
Fill in	ou have any income from employme the total amount of income you receive are filing a joint case and you have inc	ed from all jobs and all bus	sinesses, including part-	time activities.	endar years?
O N	o es. Fill in the details.				
		Debtor 1	SECURE ASSESSMENT OF A SECURE OF	Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until he date you filed for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$	Wages, commissions, bonuses, tips  Operating a business	\$4,500.00
	For last calendar year:  January 1 to December 31, 2017	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	Wages, commissions, bonuses, tips  Operating a business	\$4,400.00
	For the calendar year before that:  January 1 to December 31, 2016	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☑ Operating a business</li></ul>	\$ 4,616.00
unemp gambl List ea		nents; pensions; rental inc g a joint case and you hav	come; interest; dividends re income that you receiv	; money collected from laws ved together, list it only once	suits; royalties; and
<b>uµa</b> Ye	es. Fill in the details.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	rom January 1 of current year until he date you filed for bankruptcy:	Social Security	\$	Social Security	\$
	For last calendar year: January 1 to December 31,2017	Social Security	\$25,116.00 \$	Social Security	\$14,736.00 \$
	For the calendar year before that:  January 1 to December 31,2016	Social Security		Social Security	\$14,687.00 \$

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Debtor 1	Jeffrey M Roberts		Casi	e number (# known)	
	First Name Last Name Last Name				
Part 3:	Liet Cortain Bermants Va. M. L. B.				
rait J.	List Certain Payments You Made Be	tore You Filed	for Bankruptcy		
e Ara si	ther Debter 41s as Date of				
	ther Debtor 1's or Debtor 2's debts primarily				
L.J. NO	<ul> <li>Neither Debtor 1 nor Debtor 2 has primar "incurred by an individual primarily for a per-</li> </ul>	sonal, family, or h	ousehold purpose."		01(8) as
	During the 90 days before you filed for bank	ruptcy, did you pa	y any creditor a total o	of \$6.425* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom ye total amount you paid that creditor, child support and alimony. Also, do	Do not include pa	ryments for domestic s	SUPPORT Obligations such as	
	* Subject to adjustment on 4/01/19 and ever	y 3 years after tha	it for cases filed on or	after the date of adjustment.	
🛛 Ye	s. Debtor 1 or Debtor 2 or both have primari	ilv consumer det	ots.		
	During the 90 days before you filed for bank			f \$600 or more?	
	No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payments.	or domestic suppo	ort obligations, such as	s child support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Wells Fargo Mortgage Creditors Name	4 <u>/5/6/201</u> 8	s 5648.85	\$ <u>199,064.82</u>	Mortgage
	P.O. Box 10394				Car
	Number Street				Credit card
					Loan repayment
	Des Moines, IA 50306-0394	_			Suppliers or vendors
	City State ZIP Code	•			Other
	Lexus Financial Services	4/5/2018	s 1046.21	<sub>\$</sub> 7834.35	<b>71</b> .
	Creditor's Name				☐ Mortgage ☑ Car
	P.O. Box 4102  Number Street				Credit card
	Manager Officer				Loan repayment
		***			Suppliers or vendors
	Carol Stream, IL 4102				Other
	City State ZfP Code				Oliver
	Creditor's Name	***************************************	\$	\$	☐ Mortgage
					☐ Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZiP Code				Other

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ebtor 1	Jeffrey M					Casa sumber	
	First Name	Middle Name	Last Name		***	Case number of known	
** *							
corpor agent, such a	rs include you rations of whic including one as child suppor	r relatives; any g h you are an offi	eneral partners; r cer, director, pers	relatives of any ion in control, c	general partners; or owner of 20% or	partnerships of which more of their voting	who was an insider?  th you are a general partner; securities; and any managing r domestic support obligations.
2 No							
☐ Ye	s. List all payn	nents to an insid	er.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
					•	•	
Ĩn	nsider's Name				\$		
N	lumber Street						
_							
С	ity	Stat	e ZIP Code				
	The same				\$	<u> \$</u>	
ın	sider's Name						
Ni	umber Street	***************************************					
Cit	ty	Stat	e ZIP Code				
Include	payments on		d or cosigned by		Total amount paid		n account of a debt that benefit Reason for this payment Include creditor's name
lea	idar's Nama				\$	\$	
ItiS	sider's Name					-	
Ni.	mhos Cicasi						
140	mber Street						
Cit	у	State	ZIP Code				
					<u>c</u>		
Insi	ider's Name				\$	\$	
Nor	mber Street		***				
ridi	CHOCK CHECK						
				_			
City	y	State	ZIP Code				

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or 1	Jeffrey M	Roberts			0		
	First Name	Middle Name	Las! Name		Case number (if know	rn)	
	•						
rt 4:	Identify L	egal Actions,	Repossession	ıs, and Foreciosu	res		
Vithir	1 1 year befo	re you filed for b	ankruptcy, were	e you a party in any	lawsuit, court action, or adm	inistrative pro	ceeding?
ist all	such matters Intract dispute	i, including perso	nal injury cases,	small claims actions,	divorces, collection suits, pate	rnity actions, su	pport or custody modifi
No		.0,					
	s. Fill in the d	otaile					
	o. i iii iii iile q	etans.	\$1.4		_		
			Nature	of the case	Court or agency		Status of the ca
С	ase title						Pending
	***************************************				Court Name		On appeal
_		***************************************			Number Street		Concluded
C	ase number				4,100		□ Concraded
					City Sta	te ZIP Code	The second second
Ca	ase title				Court Name		Pending
					South Raine		On appeal
					Number Street		Concluded
Ca	ase number						
					City Stat	e ZIP Code	
		ormation below.		Describe the prope	ertu.	Date	Malarata
					•••	Date	Value of the proper
							\$
	Creditor's Name	e				<u></u> .	
	Number Stre	et		Explain what happe	anad		
		****		Property was Property was			
				Property was			
	City	State	ZIP Code	ent.	attached, seized, or levied.		
				Describe the proper	rty	Date	Value of the prope
							\$
	Creditor's Name						
	TT-111						
	Number Stree	36		Explain what happe	ned		
				☐ Property was i	repossessed		
				Property was t	•		
	City	State	ZIP Code	Property was			
	-			Property was a	attached, seized, or levied.		

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1	Jeffrey M Roberts First Name Middle Name Last	Name Case num	Der (if known)	
	<del></del> -	•		
Vith	in 90 days before you filed for bankru	ptcy, did any creditor, including a bank or financi	al institution, set off any amounts f	rom vour
ICCO	unts or refuse to make a payment bec	cause you owed a debt?	,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·
XIN ⊐				
! Y	es. Fill in the details.			
		Describe the action the creditor took	Date action Amount	
		-	was taken	_
Cr	reditor's Name			
Nic	umber Street	_	\$	
140	dispos direct			
_		-		
Cil	ty State ZIP Code	Last 4 digits of account number: XXXX		
Vithi	n 1 year before you filed for bankrupto	cy, was any of your property in the possession of	an assignee for the benefit of	
	tors, a court-appointed receiver, a cus	stodian, or another official?		
31 No 31 Ye	-			
⊒i Ye	es			
5:	List Certain Gifts and Contribut	tions		
	2.5. Seriam Ones and Contribu	tions		
iidh i r	2 2 years hafara you filed for hand,	4		
ithir	n 2 years before you filed for bankrupt	tcy, did you give any gifts with a total value of mo	re than \$600 per person?	
No.	o	tcy, did you give any gifts with a total value of mo	re than \$600 per person?	
No.	n 2 years before you filed for bankrupt o es. Fill in the details for each gift.	tcy, did you give any gifts with a total value of mo	re than \$600 per person?	
No Ye	o es. Fill in the details for each gift.			
No Ye	o	tcy, did you give any gifts with a total value of mo	re than \$600 per person?  Dates you gave Valu the gifts	e
No Ye	os. Fill in the details for each gift.  Sifts with a total value of more than \$600		Dates you gave Valu	e
Ye Ye	os. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person		Dates you gave Valu the gifts	ė
Ye Ye	os. Fill in the details for each gift.  Sifts with a total value of more than \$600		Dates you gave Valu	ė
Ye Ye	os. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person		Dates you gave Valu the gifts	e
Ye Ye	os. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person		Dates you gave Valu the gifts	ė
Ye Per	os. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person		Dates you gave Valu the gifts	e
Ye Per	os. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  I son to Whom You Gave the Gift		Dates you gave Valu the gifts	€
Ye Per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  Ison to Whom You Gave the Gift		Dates you gave Valu the gifts	e
Per Nur	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  The street Street State ZiP Code		Dates you gave Valu the gifts	<del>Ĉ</del>
Per Nur	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  rson to Whom You Gave the Gift		Dates you gave Valu the gifts	ė
Per City	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  The street of t	Describe the gifts	Dates you gave Valuthe gifts \$\$	<b>e</b>
Per City City Giff	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  The street Street State ZiP Code		Dates you gave Valu the gifts	<b>e</b>
Per City City Giff	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  To to Whom You Gave the Gift  State ZIP Code  To the construction of th	Describe the gifts	Dates you gave Value the gifts  \$\$  Dates you gave Value	e
Per City Per Gif per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  State ZiP Code  From's relationship to you  Its with a total value of more than \$600 person	Describe the gifts	Dates you gave the gifts  \$  Dates you gave the gifts  Value	e
Per City Per Gif per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  To to Whom You Gave the Gift  State ZIP Code  To the construction of th	Describe the gifts	Dates you gave the gifts  \$  Dates you gave the gifts  Value	
Per City Per Gif per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  State ZiP Code  From's relationship to you  Its with a total value of more than \$600 person	Describe the gifts	Dates you gave the gifts  S  Dates you gave the gifts  Value  S  S	
Per City Per Gif per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  State ZiP Code  From's relationship to you  Its with a total value of more than \$600 person	Describe the gifts	Dates you gave the gifts  S  Dates you gave the gifts  Value  S  S	
Per Gifty Per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  State ZIP Code  From Street  This with a total value of more than \$600 person  Fits with a total value of more than \$600 person  Son to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts  S  Dates you gave the gifts  Value  S  S	
Per Gifty Per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  State ZiP Code  From's relationship to you  Its with a total value of more than \$600 person	Describe the gifts	Dates you gave the gifts  S  Dates you gave the gifts  Value  S  S	
Per Nur	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  From to Whom You Gave the Gift  State ZIP Code  From s relationship to you  Its with a total value of more than \$600 person  Son to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts  S  Dates you gave the gifts  Value  S  S	
Per Gifty Per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 per person  To to Whom You Gave the Gift  State ZIP Code  To son's relationship to you  This with a total value of more than \$600 person  Son to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts  S  Dates you gave the gifts  Value  S  S	

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Within	Jeffrey M Roberts First Name Middle Name L	SSI Name Case number (* known)		
Within				
		uptcy, did you give any gifts or contributions with a total val	ue of more than \$	600 to any charity?
☑ No	ous. S. Fill in the details for each gift or co	ntribution		
		ntribution.		
	ifts or contributions to charities nat total more than \$600	Describe what you contributed	Date you contributed	Value
Cha	irity's Name	_	WWW.combanicalandahadahadahannyyyyyyyyyyyy	\$
		-		\$
Num	nber Street	-		
City	State ZIP Code	-		
rt 6:	List Certain Losses			
Nithin	1 year before you filed for bankrup er, or gambling?	tcy or since you filed for bankruptcy, did you lose anything	because of theft,	fire, other
aisaste 21 No	r, or gambling?			
	. Fill in the details.			
	. The more details.			
De:	scribe the property you lost and w the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
		Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		1001
			<del></del>	\$
7:	List Certain Payments or Tran	sfers		
OB 001	isource appear secking bankinbich (	tcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition? eparers, or credit counseling agencies for services required in yo		to anyone
No		,	, ,	
	Fill in the details.			
Yes.				
	ion Who Was Paid	Description and value of any property transferred	Date payment or transfer was	Amount of payment
	on Who Was Paid	Description and value of any property transferred		Amount of payment
Pers	on Who Was Pard	Description and value of any property transferred	transfer was	Amount of payment
Pers		Description and value of any property transferred	transfer was	
Pers		Description and value of any property transferred	transfer was	\$
Pers Num City	iber Street	Description and value of any property transferred	transfer was	\$

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	First Name Middle Name Last	Name			
		Description and value of any property	/ transferred	Date payment or transfer was made	Amount of payment
	Person Wno Was Paid				\$
	Number Street				¢
				<u></u>	<b>-</b>
	City State ZIP Code				
	Email or website address	··			
	Person Who Made the Payment, if Not You				
7 P.	No Yes. Fill in the details.				
		Description and value of any property	transferred	Date payment or transfer was made	Amount of paym
	Person Who Was Paid			made	
	Number Street				\$
				All All May Display for the Committee of	\$
	City State ZIP Code	toy did you sell trade or otherwise	tropofor any proper		
Vithi rans nelud o ne ☑ N	in 2 years before you filed for bankrup iferred in the ordinary course of your lide both outright transfers and transfers not include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting of a line and a li	of a security interest	or mortgage on your prop	in property perty).
Vithi rans nclude o no 1 N	in 2 years before you filed for bankrup aferred in the ordinary course of your lide both outright transfers and transfers not include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting)	of a security interest	or mortgage on your property or payments received	n property perty).
Vithing rans	in 2 years before you filed for bankrup aferred in the ordinary course of your lide both outright transfers and transfers not include gifts and transfers that you have considered in the details.	business or financial affairs?  nade as security (such as the granting or already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your property or payments received	oerty).  Date transfer
Vithing rans	in 2 years before you filed for bankrup iferred in the ordinary course of your lide both outright transfers and transfers not include gifts and transfers that you have to es. Fill in the details.  Person Who Received Transfer	business or financial affairs?  nade as security (such as the granting or already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your property or payments received	oerty).  Date transfer was made
Vithirans	in 2 years before you filed for bankrup iferred in the ordinary course of your lide both outright transfers and transfers not include gifts and transfers that you have to es. Fill in the details.  Person Who Received Transfer	business or financial affairs?  nade as security (such as the granting or already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your property or payments received	oerty).  Date transfer was made
Vithirans	in 2 years before you filed for bankrup iferred in the ordinary course of your id de both outright transfers and transfers in ot include gifts and transfers that you hav id es. Fill in the details.  Person Who Received Transfer	business or financial affairs?  nade as security (such as the granting or already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your property or payments received	oerty).  Date transfer was made
Vithirans notice on no O V V V V V V V V V V V V V V V V V V	in 2 years before you filed for bankrup iferred in the ordinary course of your lide both outright transfers and transfers in to include gifts and transfers that you have to es. Fill in the details.  Person Who Received Transfer  Number Street	business or financial affairs?  nade as security (such as the granting or already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your property or payments received	oerty).  Date transfer was made
Vithirans	in 2 years before you filed for bankrup iferred in the ordinary course of your li de both outright transfers and transfers in ot include gifts and transfers that you have ones. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	business or financial affairs?  nade as security (such as the granting or already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your property or payments received	oerty).  Date transfer was made
Within rans notice to noti	in 2 years before you filed for bankrup iferred in the ordinary course of your id de both outright transfers and transfers in ot include gifts and transfers that you have lo les. Fill in the details.  Person Who Received Transfer  Street  Person's relationship to you  Person Who Received Transfer	business or financial affairs?  nade as security (such as the granting or already listed on this statement.  Description and value of property	of a security interest  Describe any prop	or mortgage on your property or payments received	oerty).  Date transfer was made

Official Form 107

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		Case number (4 kpoting)		
1 10 years before you filed for bankry	uptcy, did you transfer any prope	rty to a self-settled tru	ıst or similar device of v	vhich you
	isset-protection devices.)			
S. Fill in the details.				
	Description and value of the prop	erty transferred		Date transfer was made
me of trust				
	***			
	<del></del>			
List Certain Financial Account	s. Instruments. Safe Dennsi	Royas and Store	a Haite	
1 year before you filed for bankrupt	cy, were any financial accounts	or instruments held in	your name, or for your	benefit,
	or other financial accounts, and	tetana a e di ancara di a		_
rage houses, pension funds, cooper	atives, associations, and other fi	inicates of deposit; sn nancial institutions	ares in banks, credit un	ions,
,	,			
s. Fill in the details.				
	ast 4 digits of account number	Tuna of apparent	0-4	
	cast 4 digits of account number	instrument	Date account was closed, sold, moved,	Last balance before closing or transfer
7idelity Financial			or transferred	•
ame of Financial Institution	8343		C# 411 O	
	XXXX	=	Still Open	<b>s</b> 5.08
umber Street				
		Money market		
		Brokerage		
State ZIP Code		Other		
ime of Einancial Institution	XXXX	Checking		\$
are of Financial mondition		☐ Savings		
Imber Street		Money market		
y State ZIP Code		Other		
,	waar hafara yay filad far bankeyy			
ies, cash, or other valuables?	, , , , , , , , , , , , , , , , , , ,	,, any care acposit	oon or other depository	101
. Fill in the details.				
	Who else had access to it?	Describe the	e contents	Do you still
				have It?
				□ No
me of Financial Institution	Name			Yes
mber Street				
une: otteet	Number Street			
	City State ZIP Code			
	List Certain Financial Accounts  It year before you filed for bankrupt It, sold, moved, or transferred? It checking, savings, money market, It rage houses, pension funds, coopera It in the details.  It in the details.  It is a side of financial institution  In the of Financial institution in the office in	Description and value of the proposes. Fill in the details.  List Certain Financial Accounts, Instruments, Safe Deposition 1 year before you filed for bankruptcy, were any financial accounts; certain graph on the details.  Last 4 digits of account number accounts in the details.  Last 4 digits of account number accounts in the details.  Last 4 digits of account number accounts in the details.  Last 4 digits of account number accounts in the details accounts in the details.  Last 4 digits of account number accounts in the details account number account number account in the details.  Last 4 digits of account number account number account in the details account number accoun	Description and value of the property transferred  Descri	Description and value of the property transferred    Description and value of the property transferred

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ebtor 1	Jeffrey M Roberts First Name Middle Name 24	sst Name	Case number (# known)	
2. Have 🔼 N		t or place other than your home w	ithin 1 year before you filed for bankrupto	у?
□ Y	es. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you stil have it?
	Name of Storage Facility	Name		□ No
	Maine of Storage Facility	Name		☐ Yes
	Number Street	Number Street		
	, <u>, , , , , , , , , , , , , , , , , , </u>	City State ZIP Code	annua annua annua dheadadha	
	City State ZIP Code	•		
art 9	identify Property You Hold	or Control for Someone Else		
	old in trust for someone.	someone else owns? Include any	property you borrowed from, are storing	for,
<b>U</b>	es. Fill in the details.			
		Where is the property?	Describe the property	Value
	Owner's Name			\$
		Number Street		
	Number Street	Manuel Street		
	Number Street	Number 34 eet		
	Number Street  City State ZIP Code		P Code	
art 10	City State ZIP Code	City State Zi	P Code	
	City State ZIP Code  City State ZIP Code	City State Zi	P Code	
or the <i>Envi</i> haza	City State ZIP Code  City State ZIP Code  City Give Details About Environ  purpose of Part 10, the following def  ronmental law means any federal, sta	City State Zimental Information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, so	oncerning pollution, contamination, relea urface water, groundwater, or other medi	ses of um,
Envi Envi haza inclu	Give Details About Environ purpose of Part 10, the following def ronmental law means any federal, sta rdous or toxic substances, wastes, o iding statutes or regulations controll means any location, facility, or prope	mental information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substancerty as defined under any environments.	oncerning pollution, contamination, relea urface water, groundwater, or other medi	um,
Envi Envi haza inclu Site utiliz	City State ZIP Code  City State ZIP Code  City Give Details About Environ  purpose of Part 10, the following def  ronmental law means any federal, stardous or toxic substances, wastes, or  ding statutes or regulations controll  means any location, facility, or proper  e it or used to own, operate, or utilize	mental Information  initions apply: ate, or local statute or regulation cor material into the air, land, soil, sing the cleanup of these substancerty as defined under any environment, including disposal sites.	oncerning pollution, contamination, relea urface water, groundwater, or other medi es, wastes, or material. nental law, whether you now own, operate	um, , or
Envi haza inclu Site utiliz	City State ZIP Code  City State ZIP Code  City Give Details About Environ  purpose of Part 10, the following def  ronmental law means any federal, stardous or toxic substances, wastes, or  ding statutes or regulations controll  means any location, facility, or proper  e it or used to own, operate, or utilize	mental Information  initions apply:  ate, or local statute or regulation commercial into the air, land, soil, soing the cleanup of these substance orty as defined under any environment, including disposal sites.	oncerning pollution, contamination, relea urface water, groundwater, or other medi es, wastes, or material.	um, , or
Envi haza inclu Site utiliz Haza subs	City State ZIP Code  City State ZIP Code  Cive Details About Environ  purpose of Part 10, the following def  ronmental law means any federal, stardous or toxic substances, wastes, or  ding statutes or regulations controll  means any location, facility, or proper  e it or used to own, operate, or utilizer  rdous material means anything an ex-	mental information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substancerty as defined under any environmental law defines as a haza contaminant, or similar term.	oncerning pollution, contamination, relea urface water, groundwater, or other medi es, wastes, or material. nental law, whether you now own, operate ardous waste, hazardous substance, toxic	um, , or
Envi haza inclu Site utiliz Haza subs	Give Details About Environ  purpose of Part 10, the following def ronmental law means any federal, sta rdous or toxic substances, wastes, o ding statutes or regulations controll means any location, facility, or prope e it or used to own, operate, or utilize rdous material means anything an extance, hazardous material, pollutant, all notices, releases, and proceedings	mental information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substancerty as defined under any environmental law defines as a haza contaminant, or similar term.	oncerning pollution, contamination, relea urface water, groundwater, or other medi es, wastes, or material. nental law, whether you now own, operate ardous waste, hazardous substance, toxic	um, e, or
Envi haza inclu Site utiliz Haza subs eport a	Give Details About Environ purpose of Part 10, the following def ronmental law means any federal, sta rdous or toxic substances, wastes, o ding statutes or regulations controll means any location, facility, or prope e it or used to own, operate, or utilize rdous material means anything an entance, hazardous material, pollutant, all notices, releases, and proceedings any governmental unit notified you the	mental information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substancerty as defined under any environmental law defines as a haza contaminant, or similar term.	oncerning pollution, contamination, relea urface water, groundwater, or other medi es, wastes, or material. nental law, whether you now own, operate erdous waste, hazardous substance, toxic of when they occurred.	um, e, or
Envi haza inclu Site utiliz Haza subs	Give Details About Environ  purpose of Part 10, the following def ronmental law means any federal, sta rdous or toxic substances, wastes, o ding statutes or regulations controll means any location, facility, or prope e it or used to own, operate, or utilize rdous material means anything an entance, hazardous material, pollutant, all notices, releases, and proceedings any governmental unit notified you the	mental information  initions apply: ate, or local statute or regulation control of these substance or material into the air, land, soil, soing the cleanup of these substance or as defined under any environment, it, including disposal sites.  Invironmental law defines as a haza contaminant, or similar term.  Is that you know about, regardless at you may be liable or potentially	oncerning pollution, contamination, relea urface water, groundwater, or other medi es, wastes, or material. nental law, whether you now own, operate ardous waste, hazardous substance, toxic of when they occurred.	um, e, or e nental law?
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or 1	Jeffrey M Roberts		Case number (#known)	
	First Name Middle Name Last	Name		
Havi	you notified any governmental unit o	f any release of hazardous materi	al?	
23	•	, di, , (0.0000 0.1.1000 0.1.1000 0.1.1000 0.1.1000 0.1.1000 0.1.1000 0.1.1000 0.1.1000 0.1.1000 0.1.1000 0.1.	<del></del> -	
_	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
	Name of site	Governmental unit		
	Number Street	Number Street		
		City State ZiP Code		
	City State ZIP Code			
	you been a party in any judicial or ad	ministrative proceeding under any	y environmental law? Include settleme	nts and orders.
	lo 'es. Fill in the details.			
_	es. rm m the details.	Court or agency	Nature of the case	Status of the
		Court or agency	Nature of the case	case
(	case title	Court Name	манария <b>н</b>	Pending
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rt 11	Give Details About Your Bus	iness or Connections to Any	Business	
With	Give Details About Your Bus in 4 years before you filed for bankrup A sole proprietor or self-employed if A member of a limited fiability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting	tiness or Connections to Any tcy, did you own a business or ha in a trade, profession, or other act bany (LLC) or limited liability partn ecutive of a corporation g or equity securities of a corpora	<b>Business</b> Ive any of the following connections to livity, either full-time or part-time ership (LLP)	any business?
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r 1 Jeffrey M F		SI Name Ca	Case number (if known)	
		Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN	
Business Name		_	EIN:	
Number Street		Name of accountant or bookkeeper	Dates business existed	
***************************************	Market and the second s	-	From To	
City	State ZIP Code	-	17011	
	re you filed for bankrurs, or other parties.	ptcy, did you give a financial statement to a	nyone about your business? Include all financial	
∮ No	•			
Yes. Fill in the de	etails below.			
		Date issued		
-		_		
Name		MM / DD / YYYY		
Number Street		-		
		_		
City		-		
City	State ZIP Code			
12: Sign Belov				
Jign Delo				
answers are true ar In connection with	nd correct. I understa	nt of Financial Affairs and any attachments, nd that making a false statement, concealing n result in fines up to \$250,000, or imprison Signature of Debtor 2	and I declare under penalty of perjury that the g property, or obtaining money or property by fraument for up to 20 years, or both.	
Date 7/6/	2018	Date 1/16/201	8	
Did you attach addi	tional pages to Your	Statement of Financial Affairs for Individuals	s Filing for Bankruptcy (Official Form 107)?	
No Yes				
id you pay or agre No	e to pay someone wh	o is not an attorney to help you fill out bank	ruptcy forms?	
Yes. Name of per	rson		. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

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Fill in this in	formation to identify	your case:	
Debtor 1	Jeffrey M Roberts	-	
	First Name	Middle Name	Last Name
Debtor 2	Delores M Robe	rts	
(Spouse, if filing)	First Name	Middle Name	Last Name
United States (	Bankruptcy Court for the:	NOKTHA Distric	ot of Illineis
Case number			
(If known)		,,	

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's Ally Financial name:	☐ Surrender the property.	□ No
Description of 2015 Buick Encore	Retain the property and redeem it.	☑ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's Wells Fargo Mortgage	☐ Surrender the property.	.,
name:	Retain the property and redeem it.	☑ No ☑ Yes
Description of Residence property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	☑ Yes
•	Retain the property and [explain]:	
Creditor's name: Bank of America	Surrender the property.	□ No
	Retain the property and redeem it.	∑ Yes
Description of Home Equity Loan property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	- 703
	Retain the property and (explain):	
Creditor's name:	☐ Surrender the property.	□ No
•	Retain the property and redeem it.	O Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

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Debtor 1 Case number (If known) Last Name Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: □ No Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No Description of leased Yes property: Lessor's name: □ No ☐ Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: No No Yes Description of leased property: Lessor's name: No No ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Signature of Det